



DISTRICT OF COLUMBIA

F A C E S . N E T

CHILD AND FAMILY SERVICES AGENCY

# HEALTH SERVICES MANUAL

Spring 2006  
Version - 1.1

(This Page Intentionally Left Blank)

# FACES.NET HEALTH MANUAL



(This Page Intentionally Left Blank)

# TABLE OF CONTENTS

PREFACE.....7

SECTION 1: INTRODUCTION.....13

SECTION 2: SYSTEM NAVIGATION.....23

SECTION 3: CLIENT INFORMATION & CONTACT/VISITS.....33

SECTION 4: FEDERAL REPORTING.....67

SECTION 5: SUPPORT TOOLS.....85

SECTION 6: APPENDIX..... 115

(This Page Intentionally Left Blank)

# PREFACE

## Course Objectives

- g Course Overview
- g Course Objectives
- g Course Curricula Tools and Symbols



(This Page Intentionally Left Blank)

# Course Overview

Welcome to the FACES.NET one-day Health Services training. This course is designed to give trainees an understanding of the functions in FACES.NET pertaining to Case Management and Health Services. The course is divided into sections, each having its own set of objectives and corresponding to a particular area of functionality in the FACES.NET system. A FACES.NET Scenario has been constructed to link the sections together and mimic the way FACES.NET will be used for Agency business. In the classroom, trainees will participate in a guided walkthrough of the FACES.NET Scenario in order to practice activities based on real-life situations.

Please keep in mind that the FACES.NET system is frequently updated, and some of the screens may have slightly changed after this document was printed.

## Course Objectives

Upon completion of this course, the trainee will have an understanding of how CFSA business process correlates with FACES.NET data entry. FACES.NET Health Services training will reinforce the lessons covered in previous trainings and day-to-day casework. By giving trainees practice time in the classroom, they will build confidence in their ability to properly enter and access data in the FACES.NET system.

Remember that a system is only as good as the information it receives. This course will train trainees how to supply FACES.NET the proper information so that it can remain a Federally Certified Child Welfare Information Systems in the Nation. Best Wishes!






## Course Curricula Tools

Curricula Features:

- § Performance Objectives
- § FACES.NET Guide
- § FACES.NET Scenarios

# Curricula Symbols

The following icons are used throughout the FACES.NET Scenario Guide:

Icon	Title	Description
	Reminder	Indicates that there is an important point to which the trainee needs to pay attention.
	Definitions	Indicates that a word or concept is being defined.
	Notes	Indicates a helpful piece of information for the trainee to know.
	Practice	Indicates Agency practice information.
	FACES.NET Guide	Indicates the section of the manual having FACES.NET step-by-step instructions.

## Course/Classroom Rules

- § Course begins promptly at 8:15AM and ends at 5:00PM on the each consecutive training day.
- § Lunch is one (1) hour.
- § One fifteen (15) minute break in the morning and one fifteen (15) minute break in the afternoon.
- § No eating or drinking in the classroom.
- § No roaming on the Internet.
- § Cell Phone should be off or in vibrate/silent mode.



(This Page Intentionally Left Blank)

# SECTION 1: INTRODUCTION

- g What is FACES.NET?
- g How to use This Manual
- g How to Get Help
- g The Family Case



(This Page Intentionally Left Blank)

# Introduction

## What is FACES.NET?

FACES.NET is the District of Columbia's Statewide Automated Child Welfare Information System (SACWIS). The Child and Family Services Agency (CFSA) is the District of Columbia's child protection agency, which employs more than 300 social workers, and partners with fifteen private agencies. FACES.NET is designed to support social workers and the Agency in the following areas:

- Case management activities, such as documenting contacts/visits, writing case plans and court reports;
- Issuing payments to service providers;
- Collecting data to produce outcome-based management;
- Standardizing policy and practice.

FACES.NET has enabled the Agency to collect and disseminate information to diverse audiences including the Court Monitor, the Mayor's Office, The Washington Post, Federal oversight agencies such as the General Accounting Office (GAO), Administration of Children and Families (ACF), and Congress.

## How to Use this Manual

This FACES.NET Health manual is designed to introduce and reinforce the concept of using an automated information system to improve child welfare practice. In particular, the guide focuses on the responsibilities of social workers, who are the front-line workers of the Agency.

This manual further serves two functions. First, it will be your guide during the FACES.NET portion of your CFSA Health Services training. With your instructor, you will complete each of the sections and gain an understanding of how to use the FACES.NET system in your day-to-day case management responsibilities. You will complete the sections over the three-day course. Each section is organized in an easy-to-read manner laying the groundwork with a Practice Overview segment. Afterwards there are detailed step-by-step instructions on how to accomplish that topic using FACES.NET.

The second function of this manual is to serve as a desktop guide for FACES.NET use after you have completed the initial training. You may keep this copy of the manual, and make any notes that you desire during class. At the end of each section is a page designated for note-taking. Later, if you need to review how a particular task is performed in FACES.NET, you can look it up at your convenience.

This document adheres to standardized technical writing conventions. All command buttons are displayed the way they appear on the computer screen. All commands are in

bold, indicating that an action should be taken. Each scenario is introduced using real case stories or training activities in order to provide an appropriate context for the particular module. Throughout the manual, participants in the Jackson case are highlighted using the underline feature.

## How to Get Help

If you still have question after consulting this resource, you are of course welcome to contact the FACES.NET Helpdesk. Helpdesk staff is available from 8:00 AM - 5:00 PM every weekday to assist with FACES.NET and technical questions. The FACES.NET helpdesk can be reached at 202-434-0009.

## The Family Case

The Jackson family case is the case you may be familiar with from other elements of your Health Services training, and is used as the sample case in this document. The scenario that you may use during the actual FACES.NET training may slightly differ. If so, follow your instructors' directions on how to reconcile this manual with the case details you see in FACES.NET. Details of the Jackson family case begin on the following pages.

# Jackson Case Narrative

## Office of Training Services Pre-Service Training for New Social Work Staff Field Practice Case

### Learning Objectives:

1. Through using a case illustration, workers will have a better understanding of CFSA's programs and policies.
2. Through case illustration, workers will be able to understand how to effectively deliver services to clients.

Case Name: Shanté Jackson

### Case Description:

The Jackson case came to the attention of Child and Family Services Agency's Child Protective Services Administration due to an allegation of abuse and neglect against Ms. Jackson. Ms. Jackson was previously known to CFSA. A neighbor reported Ms. Jackson's young children were left home alone and were seen in the streets unsupervised, unkempt and inappropriately dressed. It was also alleged that there were drug trafficking activities in Ms. Jackson's apartment. Upon investigation of the allegations, you observe that one child had (what appeared to be) belt marks on both arms and on her back.

### Household Composition:

Name	Age	Gender	Description
<u>Shanté Jackson</u>	30 years old	Female	Mother
<u>Paul Williams</u>	16 years old	Male	Son/Sibling
<u>Femalé Scott</u>	15 years old	Female	Daughter/Sibling
<u>Keyshawn Jackson</u>	12 years old	Male	Twin Son/Sibling
<u>Reyshawn Jackson</u> (Rev-Rey)	12 years old	Male	Twin Son/Sibling
<u>Tanisha Holmes</u>	7 years old	Female	Daughter/Sibling
<u>Latonya Holmes</u>	5 years old	Female	Daughter/Sibling
<u>Lakeisha Jackson</u>	3 years old	Female	Daughter/Sibling
<u>Rodney Scott</u>	2 years old	Male	Grandson
<u>Kiana Scott (Bebe)</u>	6 months old	Female	Granddaughter

## Family Description:

Shanté Jackson is a 30-year-old, single, African American female. She is the mother of seven children and two grandchildren. She has a 7<sup>th</sup> grade education and no history of employment. Shanté has a history of substance abuse, sexual abuse, and depression. She currently uses cocaine and alcohol and is involved in selling drugs from her apartment. Shanté receives public assistance. Last month, she was beaten by one of her drug dealer boyfriends. She received multiple bruises to her head and body, a broken arm, and a black eye. As a result, she continues to suffer from frequent severe stomach pains and headaches. Shanté is estranged from her family members and has no contact with the biological fathers of her children. She does not have a support system or friends.

Paul Williams is a 16-year-old, African American male. He attends Carter Senior High School where he is in the 9<sup>th</sup> grade for the third time. His grades are poor and he is often truant. Socially, Paul functions at a very low level. He has few friends, displays extreme anger and aggression towards others, and often gets into fights with peers and school officials. Paul smokes marijuana and drinks beer at least twice per week and on weekends. He also assists his mother sell drugs from their home. He has been involved in petty thefts and has had frequent trouble with law enforcement officials.

Femalé Scott is a 15-year-old African American female. She has two small children Rodney, age 2, and Kiana (Bebe), age 6 months. Rodney displays temper tantrums and aggressive behavior that are often difficult for Femalé to handle. Otherwise he is progressing well and is happy and healthy. Femalé dropped out of junior high school when she became pregnant with her son Rodney. She sporadically attended an adult education program until she became pregnant with Kiana. During her pregnancy with Kiana, she occasionally drank beer and smoked marijuana. Currently, Femalé does not attend school. She is unaware of the whereabouts of her son Rodney's father. However, she has sporadic contact with Kiana's father, Ricky Boone, who provides no financial support to his daughter. Femalé smokes marijuana and drinks alcohol. She often hangs out on the corner with her friends and leaves Rodney and Kiana at home with her seven-year-old sibling, Tanisha. Although Femalé lives with her mother, they have a strained relationship. They frequently argue and fuss at each other regarding Femalé's children and household responsibilities.

Rodney Scott is a 2 year old, African American toddler. He is a happy and healthy child. However, he displays temper tantrums and aggressive behavior that are difficult for his mother to handle. Rodney is progressing well developmentally. He enjoys playing with his 6 month old sibling, his aunt and uncles. He also enjoys watching Barney and Teletubbies.

Kiana Scott (known to her family as Bebe), is a 6 month old African American infant. She is progressing poorly physically and developmentally. Kiana possibly has failure to thrive syndrome. However, she sporadically receives her well baby check-ups as Femalé often forgets her appointments. Kiana's eating habits are poor; she has not gained adequate weight in the last three months and has some developmental lags. Kiana cries excessively when she is not being held or played with.

Keyshawn Jackson is a 12-year-old African-American male and twin brother of Reyshawn. Keyshawn currently attends Parker Junior High School, where he is in the 6<sup>th</sup> grade. He

receives special education and is classified as emotionally disturbed. Keyshawn's grades are poor. He bullies other children in his class and is often involved in altercations. Keyshawn is disrespectful to his teachers and other school officials. He has been suspended twice in the last month. His grades are poor. Keyshawn displays anger and aggression both in school at home. His mother is unable to handle his angry outbursts and rages. He also destroys property at home and frequently gets into fights with his siblings and peers in the neighborhood.

Reyshawn Jackson (Rey-Rey) is a 12-year-old African-American male and twin brother of Keyshawn. Reyshawn attends Parker Junior High School, where he is in the 6<sup>th</sup> grade. He receives special education and is classified as learning disabled. Reyshawn is socially withdrawn and often appears sad and depressed. Reyshawn also stutters and prefers not to talk in order to avoid being teased. He has few friends and has difficulty fitting in with his peers. His grades are poor, but he tries very hard. At home he is sad, withdrawn, and is teased by his siblings.

Tanisha Holmes is a 7-year-old African-American female. She currently attends Lee Elementary School, where she is in the 3<sup>rd</sup> grade. Tanisha is an outgoing and friendly child. However, she is often attention seeking and overly affectionate with adults. Socially, she has few friends and gets along well with peers. Academically, she has difficulty with reading and math. She participates in a reading and math resource program at school and tries very hard to succeed. She is well liked by her teachers. Tanisha suffers from Enuresis and occasional Encopresis. She is embarrassed by her condition due to the fact that her classmates tease her about her odor. Tanisha also needs glasses. At home, Tanisha is overly sweet and compliant. However, her mother often physically punishes her for wetting and soiling herself. Tanisha also has unrealistic expectations and adult responsibilities placed on her, as she is often the caretaker for the younger children (Latonya, Lakeisha, Rodney, and Kiana) in the home. Consequently, Tanisha receives a beating for the wrongdoings of the other children. Tanisha enjoys her role as caretaker as she doesn't have many friends.

Latonya Holmes is a 5-year-old African American female. She attends Lee Elementary School, where she is Kindergarten. Latonya enjoys school and is generally a happy child. Latonya suffers from chronic bronchial asthma. She often requires hospitalization after an attack. Latonya's bronchial asthma is controlled with medication. At home, Latonya is quiet and withdrawn and cries easily. Latonya sleeps with her mother due to lack of space in the home. However, her mother's boyfriend also sleeps in the same bed occasionally. Due to the sleeping arrangements, Latonya has been subjected to ongoing sexual molestation by the mother's boyfriend. She revealed this to her sister Tanisha and told her not to tell. Latonya enjoys watching Barney and Teletubbies on television.

Lakeisha Jackson is a 3-year-old African American female. Lakeisha was born with a positive toxicology to cocaine. She was also born with the sickle cell trait. She was placed in foster care at birth, but returned home after three months. Lakeisha is developmentally delayed. She uses one to two word phrases, walks on her toes, and sucks her thumb. She is not potty trained and continues to use a bottle. Lakeisha also sleeps in the bed with her mother and Latonya. Lakeisha has frequent colds. She enjoys watching Barney and Teletubbies.

#### Description of Environment:

The family resides at 1254 Edgefield Terrace # T105, at the Brookfield Housing projects, in the N.E. section of Washington, D.C. The neighborhood is predominantly comprised of African Americans and some Hispanics. The neighborhood is heavily drug and crime infested. However, there are many community services and resources in the area. This includes substance abuse programs, mental health clinics, the Edgefield Collaborative, hospitals, and shelters.

#### Description of the Home:

The Jackson home consists of two bedrooms, one bathroom, a small living room/dining room, and a tiny kitchen. Home maintenance is very poor. The apartment reeks of urine, and is cockroach infested. There is dirty clothing and other miscellaneous items scattered all over the apartment floor. The kitchen is filthy with dirty dishes in the sink, on the countertops, and on the floor. The apartment is sparsely furnished with one couch, a small dining room table, one small television, two full size beds, one crib, and a playpen.





# SECTION 2: SYSTEM NAVIGATION

- g Definition of Icons and Language Usage in FACES.NET



(This Page Intentionally Left Blank)



## Practice Overview

FACES.NET is strategically used to support case practice and the business processes within each Administration. There are common icons and buttons that run throughout FACES.NET and aid in the ease of use of the FACES.NET screens. This segment illustrates some important features to know about the FACES.NET system.

### Definition of Icons and Language Usage in FACES.NET

This segment reviews icons and language usage in this guide relative to FACES.NET.

#### Drop-Down Menu

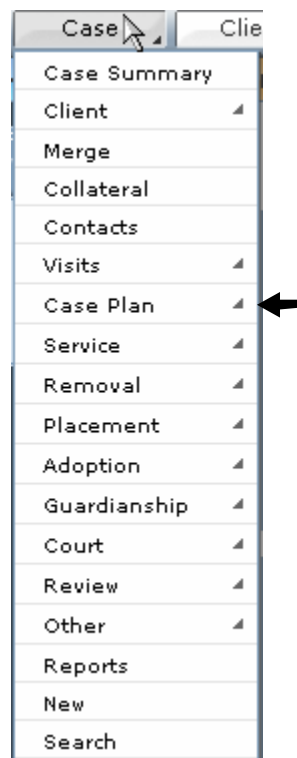
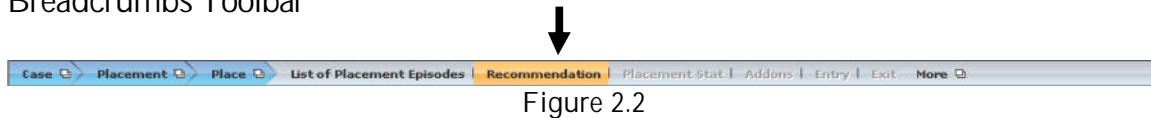


Figure 2.1

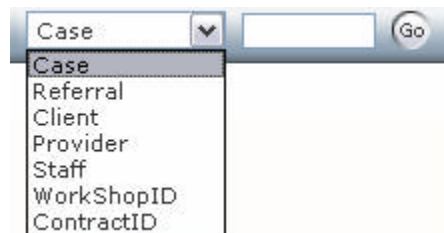
The gray command buttons at the top at the top of the FACES.NET screen is the Drop-Down Menu. These command buttons, which features the Referral, Case, Client, Provider, and Admin, is always accessible in FACES.NET, no matter what screen you are on. The options, within the menu, dynamically change as different entities are brought into focus, but the five main command buttons remain accessible. The menu includes a parent/child system. What this means is that any menu that has a gray arrow on the right side of the menu contains additional screens within it.

## Breadcrumbs Toolbar



This toolbar is displayed when a specific track (Referral, Case, etc.) is selected. This toolbar will change depending on where you are in the system. Blue areas are previous selections accessed through these command buttons display menu listings which will dynamically change. The orange button is the screen that is currently in the work area.

## Quick Link



The Quick Link is a new functionality within FACES.NET. This box, in the upper right hand corner of FACES.NET, allows for the entry of a Referral, Case, Client, Provider, Staff, Workshop ID, or Contract ID to bring that entity into focus.

## Toolbar Additional Screen Icon

The additional screen icon is a small picture found on certain toolbar buttons. If the button has this icon, it means that there are lower level screens associated with that button. When you click on that button, it will move to the left side of the breadcrumbs toolbar, and a new series of buttons will appear on the right side of the toolbar. If a toolbar button does not have an icon, it means that there is only one screen associated with that button.



Button with Icon



Button with no Icon

## Radio Buttons

Radio buttons are the round circles found next to certain fields in FACES.NET. These allow you to quickly select a displayed option. Once selected, the radio button will turn to green. Only one radio button may be selected at a time.

Figure 2.6



## Select Boxes


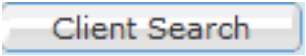

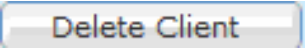
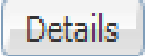
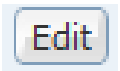
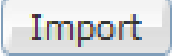

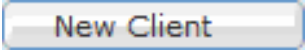

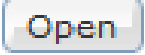
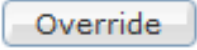
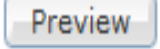

Select Boxes are collections of check boxes within a pop-up screen. These allow you to quickly select a displayed option. Once selected, the check box will contain a • inside the box. Unlike the radio button, more than one check box within the select box may be selected at a time.


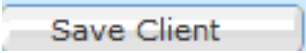



Figure 2.7

## Command Buttons

The row of gray/orange buttons on the bottom of any FACES.NET screen is called the Command buttons. These buttons are used to perform specific actions. A list of common command buttons and their functions are provided below:

Command Buttons	Definition
	Approval – Sends information to the Supervisor for approval.
	Cancel - Exits the current screen (This should be used every time you exit a screen).

Command Buttons	Definition
	Clear – Clears all the information out of all fields within the screen. This will not delete saved information within a record.
	Client Search – Searches the client within the FACES.NET System.
	Delete – Erases a record from the database. This action is normally disabled in most screens.
	Delete Client – Deletes a client from the referral in the Hotline Report Screen.
	Details – Shows the details of a file within the File Cabinet.
	Edit – Opens a field for editing.
	Import – Imports a file to the File Cabinet.
	New – Creates a new record. Creates a blank record on the screen in focus.
	New Client – Opens a new client in the Hotline Report Screen.
	Ok – Enters a selection into the record.
	Open – Opens a file within the File Cabinet.
	Override – Allows for a supervisor to override a decision made within the CPS Outcome screen.
	Preview – Allows for viewing of a report as a .pdf file.
	Print – Prints a selected report from the Management Reports.

Command Buttons	Definition
	Save – Saves the record to the database.
	Save Client – Saves a client to a referral in the Hotline Report screen.
	Search – Searches the database for a specific record.
	Show – Puts a selected entity/record into focus.
	Validate – Validates Information within the Hotline Report screen.

# Notes

(This Page Intentionally Left Blank)

(This Page Intentionally Left Blank)

# SECTION 3: CLIENT INFORMATION AND CONTACT/VISITS

## Performance Objectives

In this Section, you gain confidence in your ability to:

- g Add a New Client
- g Update and view Client Information
- g Record a Contact/Visit



(This Page Intentionally Left Blank)



## Practice Overview

### Client Information

Accurate client information entered into the FACES.NET system is crucial to the working of a case and the care of the children and families in the care of the Agency. Some information may not be known to the Agency at the early stages of the case but the social worker is responsible for acquiring this information and entering it into the FACES.NET system.

In addition the Agency uses FACES.NET data (mostly, entered by the social worker) to determine the eligibility of a child for IV-E claiming, and then submits its findings to the Federal government for subsidies. Client information entered in FACES.NET is utilized to generate management and federal reporting, as well as guide the social workers performance measures.

It is the responsibility of the social worker to verify the client information in FACES.NET. If the case has been recently transferred to you, then after reviewing the hardcopy case records and participating in the Transfer Staffing, the worker would schedule a visit with the child/family to build rapport. Much of the information in the demographics segment of the case may need to be verified, i.e. if there is missing social security numbers or missing birth dates.

### Contacts/Visits

Contacts/Visits with the child and the foster provider on a regular basis are an essential part of evaluating the progress of the child(ren) and how they react to their new environment. It also helps the social worker understand whether or not the current foster provider is able to meet the needs of the child(ren) and families. The Contacts screen in FACES.NET is used to record contacts between the social worker and a client. The Visits screen in FACES.NET is used to document court-ordered or non-court-ordered plans of visitation between parents and child(ren) or siblings. Both screens will pull information to the contact and visit management reports.

### Reviewing Contacts/Visits

Frequent, purposeful contacts/visitations with children and families is central to promoting safety, permanence, and well being.

### Contacts with Families Receiving In-Home Services:

- Goal of visiting twice per month, but a minimum of once per month;
- Every visit is to include a private visit with the child for whom abuse or neglect is substantiated (except when the child is less than 18 months old);
- During visits:
  - Assess safety;
  - Ensure children's needs are being met;
  - Assess progress on the case plan and initiate updates through discussions with parent(s).

- Document the details of the contact in FACES.NET within 24 hours, on the contact screen.

#### Contacts with Children in Out-of-Home Care:

- In the first 8 weeks in out-of-home care or a new placement, a minimum visit of once per week; thereafter, a minimum of once every 2 weeks;
- Every visit to include a private visit with the child (except when the child is less than 18 months);
- Children placed more than 100 miles outside of D.C. shall have a social worker from the receiving state supervise the placement through the ICPC, but the CFSA or contracted agency social worker shall call the social worker from the receiving state monthly, when possible, call the child monthly, when he or she has a relationship with the child, and visit with the child face-to-face at least twice per year;
- During visits:
  - Assess safety;
  - Ensure children's needs are being met;
  - Assess progress on the case plan and initiate updates;
  - Discuss upcoming events and children's concerns.
- Document the details of the contact in FACES.NET within 24 hours on the contact screen.

#### Contacts with Parents of Children in Out-of-Home Care:

- When the goal is reunification, visit the parent(s) in the home a minimum of twice per month in the first 3 months post-placement; After the first 3 months, for as long as the goal remains reunification, visit a minimum of once per month;
- During visits:
  - Ensure progress on the child and family plans;
  - Assist in attaining needed resources;
  - Affirm progress and discuss issues;
  - Discuss any health needs or appointments for the child.
- Document the details of the contact in FACES.NET within 24 hours on the contact screen.

#### Visits Between Children in Out-of-Home Care and Their Families:

- When the goal is reunification, visits shall be a minimum of once per week, unless the child's best interest (documented in the case plan) requires less frequent visitation;
- When the goal is not reunification, visits are based on the child's best interest. If reasons are identified for visits to be limited or denied, present a recommendation to the Court for a determination;
- Visits between siblings shall be a minimum of twice per month;
- Visits shall be in the parent's home when the goal is reunification, unless there are reasons against it documented in the record. In all cases, visits shall be in the most family-like setting possible;

- CFSA may request that the Court deny or limit visitation with individuals if in the child's best interest;
- Document the details of the visit in FACES.NET within 24 hours of the visit on the visit log screen.

For further reference to visit and contact requirements see the electronic form of the CFSA's Policy and Procedures through the Help menu of the FACES.NET system.



## FACES.NET Guide

The previous section reviewed agency practices around updating client information with accurate data and also contacts/visits; this section will go through all the relevant FACES.NET screens.

### Modifying the Client Screens

When a case is created in FACES.NET it is transferred to the appropriate unit and specific social worker for case management and providing of services to the family. During the management phase, the social worker is able to record all client information and contacts in FACES.NET. Many of the screens within the Case Management toolbar are relatively straightforward, and for these screens, this section will point out their location and briefly describe their purpose. Other screens within the toolbar are more complex, incorporating several sub-screens and various ties to other areas of the FACES.NET application. This section will address these more elaborate screens through FACES.NET Scenario based instruction highlighting the special features of the area in focus.

### FACES.NET Scenario

As mentioned previously, the Jackson case was brought to the attention of Child and Family Services Agency's CPS Unit due to an allegation of neglect against Ms. Jackson. Ms. Jackson was previously known to the system. A neighbor reported that Ms. Jackson's young children were left home alone and were seen in the streets unsupervised, unkept, and inappropriately dressed. It was also alleged that there were drug trafficking activities in Ms. Jackson's apartment.

As the social worker you realize that Kiana Scott, also a member of the family, was not entered into the FACES.NET system during the investigation, so you will need to enter his information yourself. You also need to enter information for visits you have made to the family. This section will show you how to accomplish this.

For your reference there are 10 members of the family and they are as follows:

The Jackson Case		
<u>Shanté Jackson</u>	30 years old	Mother
<u>Paul Williams</u>	16 years old	Son
<u>Femalé Scott</u>	15 years old	Daughter
<u>Key Shawn Jackson</u>	12 years old	Twin Son
<u>Rey Shawn Jackson (Rey-Rey)</u>	12 years old	Twin Son
<u>Tanisha Holmes</u>	7 years old	Daughter
<u>Latonya Holmes</u>	5 years old	Daughter
<u>Lakeisha Jackson</u>	3 years old	Daughter
<u>Rodney Scott</u>	2 years old	Grandson
<u>Kiana Scott (Bebe)</u>	6 months old	Granddaughter

## Add a New Client

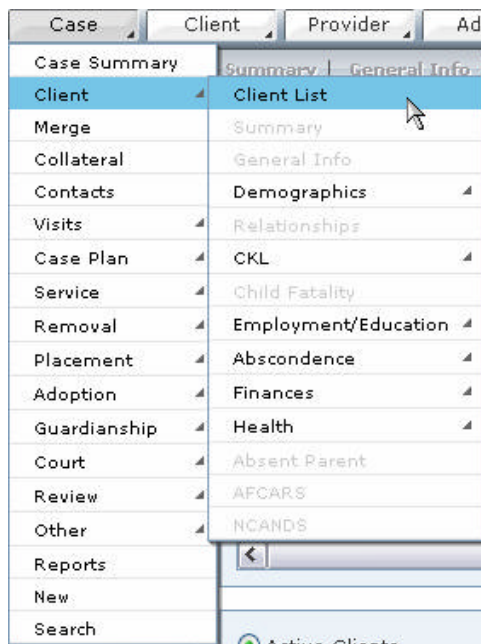


Figure 3.1

Steps Include:

Step 1: Place the cursor over the Case menu, then Client and click Client List.

Step 2: Click the New button.

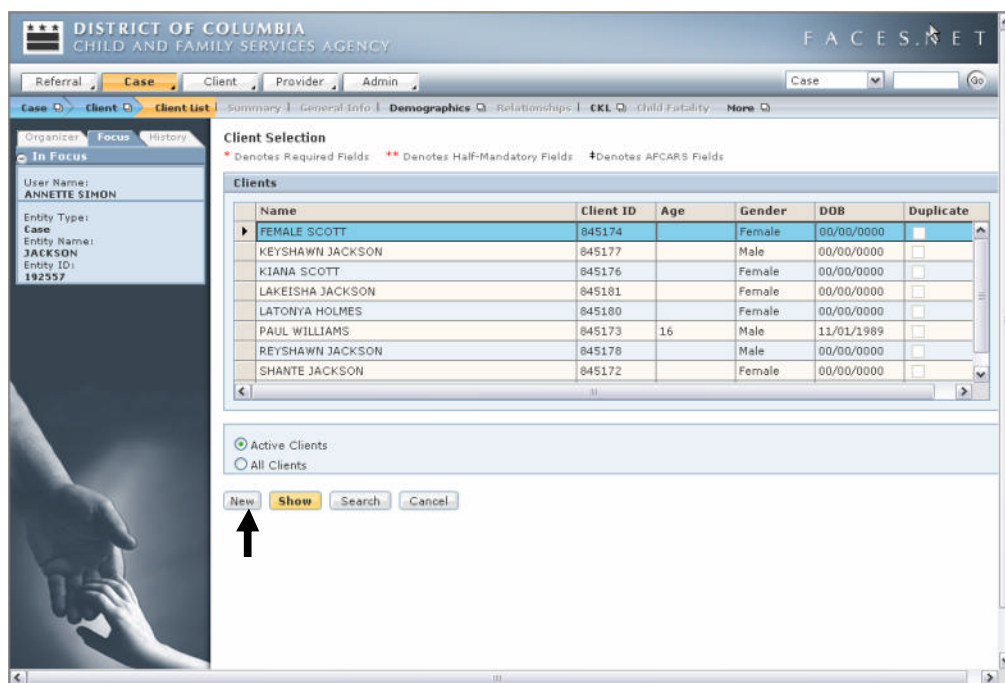


Figure 3.2

Step 3: Enter the following information into the correct fields:

First Name: Kiana

Last Name: Scott

DOB 01/30/2003

Gender: Female

Participating as a Child: Yes

Role In Case: Child

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Client Client List Summary General Info Demographics Relationships CEL Child Fatality More

**Client Summary**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields \* Denotes AFARS Fields

☐ Duplicate Client

**Client Details**

Prefix First\*\* Middle Last\*\* Suffix Maiden Name  
RODNEY SCOTT

Gender\* Date Of Birth\* SSN Medicaid# In Household#  
Male 12/1/2005 123-45-6789 ☐ SSN Verified 0

☐ Deceased Date Of Death Death Certificate# Number of persons in household  
0

**Dates of Involvement in Case**

Start Date\* End Date Reason For End Date  
12/1/2005

☐ Non-participating Member

☐ Head of the Household Participating as a Child\* Reason Description  
Yes

**Citizenship/Religion**

Citizenship/Alienage\* Alien Registration Number Nationality Religion

**Role In Case / Language**

Role In Case\* Languages ☐ Need Interpreter

Select Select

Save Cancel REF

Figure 3.3

Notes:

- All fields with asterisks and colored yellow are mandatory and must be filled out in order to save the information;
- All fields with double asterisks are half mandatory, meaning that information must be in at least one of the fields in order to save the information;
- FACES.NET will check entries for duplicates before adding the record.



Points to Remember:

Blue fields in FACES.NET are Federal Reporting fields. Although not mandatory in order to save the screen, they must be filled in.

- Step 4: To enter information on the client's current residence, click the Residence tab. To enter other descriptive information, such as physical characteristics and race, click the Other tab.
- Step 5: Click Save to save the information entered. FACES.NET will now search to see if the client is already in the system. If possible matches are found, a list will be shown allowing you to check these clients' information. This helps prevent the entry of duplicate clients.
- Step 6: If matches are found, a list will be shown.
- Step 7: The Potential Matches dialog box appears. At the bottom are the same 9 tabs that are found in the Search Results pop-up box.
- Step 8: If the client is found in the Potential Matches list, highlight that client and click the Select button in the Potential Matches section to import this client and data into your case.
- Step 9: If the client is not found in the Potential Matches list, click the Select button in the top section beside the name of the new client. This will add that client as new and assign a unique client ID number to him/her.
- Step 10: If after clicking Save on the main screen, there are no matches, you will receive a pop-up window with a message saying that there are no matches and to click Yes if you wish to add this client as new.

## Viewing General Client Information

To view general client information, complete the following steps:

Steps Include:

Step 1: Place the cursor over the Case menu, then Client, and click Client List.

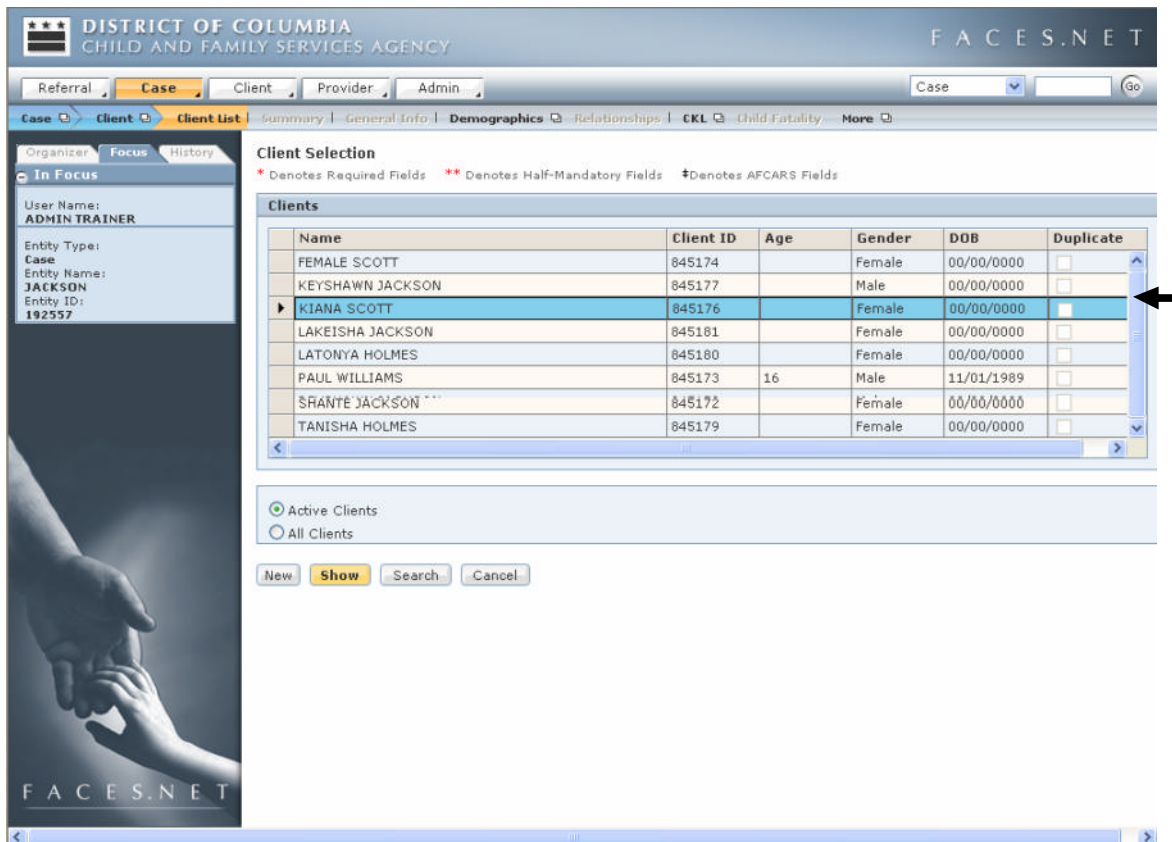


Figure 3.4

Step 2: Click an existing client from the Client List and click Show to display or edit general information for this client.

Step 3: Click New to enter information for a new client. Enter information for Kiana Scott from the sample case.

## Viewing Cases and Entering Client Information

The client screens in the FACES.NET application allow you to enter many types of information about clients, including demographic data, the client's role in the case, clients' relationships with each other, employment, medical, and educational information, and data for compliance with Federal standards. This section will show you how to enter this information accurately.

In the following exercises, you will view and edit case and client information.

### View General Case Information

Steps Include:

Step 1: Place the cursor over the Case menu and click Case Summary.

The screenshot displays the FACES.NET application interface. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. The 'Case' tab is selected, and the 'Case Summary' sub-tab is active. The sidebar on the left shows the 'Focus' tab selected, displaying user information for 'ADMIN TRAINER'. The main content area shows the 'Case Summary' for 'JACKSON01'. The 'Information' section includes fields for Case Name (JACKSON01), Family Case Type (CPS), Case Number (192566), and Family Worker (ADMIN TRAINER). The 'Assignment' section is empty. The 'Reason for Agency Involvement' section shows a referral on 01/05/2006. The 'Case History' section shows an open date of 01/06/2006. At the bottom, there are buttons for 'Save', 'Reopen', 'Close Case', and 'Cancel'.

Figure 3.5

Step 2: If necessary, the general case name can be changed by entering a new name into the Case Name field and clicking Save.

Step 3: Place the cursor over the Case menu, then Client, and click Client List.

Step 4: Click Cancel to exit this screen.

### The Client Button

This functionality is used to select the client in a case whose information you want to add, view or update. It contains all of the same buttons as under the investigation toolbar with the addition of the AFCARS (discussed later in Section 14) and CKL buttons (discussed later in Section 9).

### NEW TERM



**Client ID** – This is a unique series of numbers assigned to each client in a case or referral. When a client is first entered on the client screen, the FACES.NET system automatically generates a client ID number for that client.

### Client Information Summary

To view a summary of entered client information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the Case menu, then Client and click Client List.

Step 2: Highlight client and click Show.

Step 3: To view the Client Summary screen, click Summary.

Step 4: This read-only screen displays key information entered on other screens, such as the client's location, court status, and the reason for agency involvement.

### Client Demographics

To add, view or update client demographic information, complete the following steps.

Steps Include:

Step 1: Click the Client button within Case.

Step 2: Highlight client and click Show.

Step 3: To enter detailed demographic information for a client, click Demographics.

Step 4: There are five sub-screens under Demographics. Each allows the entry of different information, as follows:

- Address information can be entered on the Address screen;
- Phone numbers can be entered on the Phone # screen;
- Aliases can be entered on the AKA screen. This information can prove useful in many situations (for example: Perhaps while making a home visit, the client is nowhere to be found and you need to ask a neighbor if they have seen or heard from your client. However, the neighbor only knows your client by his/her nickname.);
- Additional physical and behavioral traits can be entered on the Characteristics screen;
- Marital status can be entered on the Marital screen.

## Client Relationships

To enter relationships between clients, complete the following steps:

Steps Include:

- Step 1: Place the cursor over the Case menu and click Case. This will bring up the List of Clients screen.
- Step 2: Highlight client and click Show.
- Step 3: Client relationships can be entered on the Relationship screen, which can be displayed by clicking Relationships.
- Step 4: Since we have just entered Kiana as a client in the example case, we will need to set up his relations to the other clients. Make sure that Kiana is the current client by clicking Client, selecting her name, and clicking Show. Then click Relationships.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Client Client List Summary General Info Demographics Relationships CKL Child Fatality More

**Client Relationships Case**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Client 1	Relation	Client 2	Caretaker	Paternity Established	Date Established
KIANA SCOTT	Sister (Biological)	RODNEY SCOTT	N		

**Relationship Information**

Client 1\* KIANA SCOTT Relationship with Client 2\* Sister (Biological) Client 2 RODNEY SCOTT

Client 1 is the Caretaker\* No

**Dates**

Start End

**Paternity of Client 2**

☐ Paternity Established ☐ Court order in process for establishment of paternity

Date Established

New Save Cancel

Figure 3.6

Step 5: First, enter Kiana's relationship with her brother, Rodney. Select Rodney from the Client 1 drop-down list. Then select Brother (Biological) in the Relationship with Client 2 drop-down list. Finally, select No in the Client 1 is the Caretaker pick list. Click Save to add the relation information.

Step 6: To enter additional relations, for example between Kiana and her parents, first click New. Then enter the relation information and click Save.

## Center of Keys for Life

Center of Keys for Life referrals can be entered on the CKL screen. This screen will be covered in greater detail in Section 9.

## Employment or Education Information

To add, view or update client employment, education or military information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the Case menu, then Client, and click Client List.

- Step 2: Highlight client and click Show.
- Step 3: Click Employment/Education to display the Employment, Education, and Military screens.
- Step 4: Enter information pertaining to the client's occupation on the Employment screen.
- Step 5: Enter information pertaining to the client's military status on the Military screen.
- Step 6: Enter information pertaining to the client's educational level and school on the Education screen. The education screen has three tabs.
- Step 7: On the School/DayCare/College/University tab, enter the name of school that your client attends.



Note: Schools in the District of Columbia and Prince George's County (i.e. High schools, local universities and colleges) are listed in the Name\*\* field. Once a school is selected, the phone number and address will automatically populate to their respective fields.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Client Employment/Education Employment Education Military I

Organizer Focus Utilities

**In Focus**

Entity Type: Case  
Entity Name: JACKSON  
Entity ID: 192557

Entity Type: Client  
Entity Name: FEMALE SCOTT  
Entity ID: 845174

**Client Education**

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields \* Denotes AFCARS Fields

**School/DayCare**

Date Update	School Name	Daycare Name	City Name	Grade Level	Status	School Enrollment Date

**School/DayCare/College/University** Education Strength/Needs

**School**

Type \*\* Name \*\*

Specify Phone Ext Enrolled Date

Address

Select

**DayCare**

Name \*\* Phone Ext Enrolled Date

Address

Select

New Save Cancel

Figure 3.7

Step 8: On the Education tab, enter information about the client's educational level.



Note: Whenever the educational status of a client has changed (i.e.: client has been truant) it is important to record and keep track of that information in FACES.NET.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Client Employment/Education Employment Education Military I

Organizer Focus History

**In Focus**

User Name: ANNETTE SIMON

Entity Type: Case  
Entity Name: JACKSON01  
Entity ID: 192566

Entity Type: Client  
Entity Name: FEMALE SCOTT01  
Entity ID: 845194

**Client Education**

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**School/DayCare**

Date Update	School Name	Daycare Name	City Name	Grade Level	Status	School Enrollment Date
	Bladensburg High School					

School/DayCare/College/University Education **Strength/Needs**

**Strengths**

- Has good reasoning skills
- Can do most basic math
- Does well if applies self

**Needs**

- Good studying habits
- Completion of homework

New Save Cancel

Figure 3.8

Step 9: Lastly, on the Strengths/Needs tab, note some educational strengths and needs for your client.

Step 10: Click Save to save the screen.

## Finances

To view or edit client financial information, complete the following steps.

Steps Include:

Step 1: Place the cursor over the Case menu, then Client and click Client List.

Step 2: Click Finances.

Step 3: The Finances screen will be displayed; where client financial and payment information can be entered.

Step 4: The Finances screen will be covered in detail in Section 11.

## Health

To add, view or update client health information, complete the following steps:

Steps Include:

- Step 1: Place the cursor over the Case menu and then Client.
- Step 2: Click the Client List button.
- Step 3: Highlight client and click Show.
- Step 4: Medical information, such as immunization records, allergies, test results, and medical appointments can be entered or viewed in the Health screens. To display the Health screens, click Health.
- Step 5: Most medical information can be entered into the FACES.NET database in the form of an appointment. To view an existing appointment, schedule or create a new one, click Appointments. A list of appointments will be displayed (See Figure 3.9).

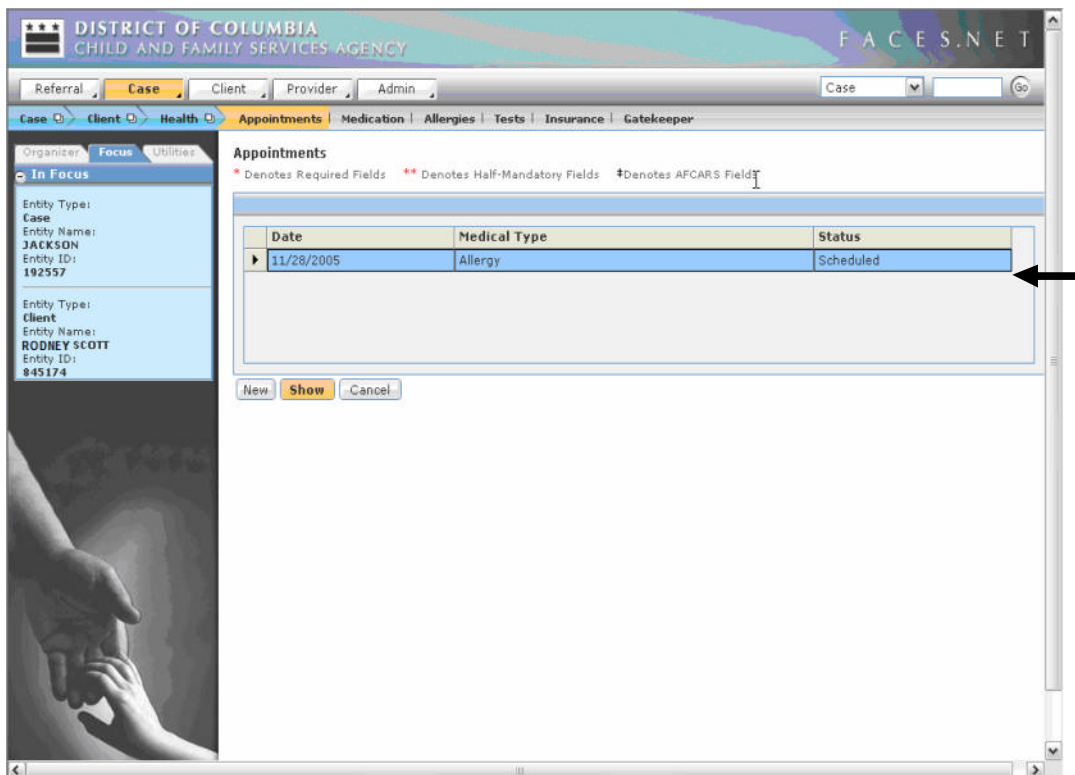


Figure 3.9

- Step 5: To view an existing appointment, click the desired appointment and click Show. To create a new appointment, click New.

## Create a New Appointment

Steps Include:

Create a new allergy appointment for Kiana. First, make sure that Kiana is the active client. Then click Health, then Appointments, to display the Select Medical Appointment list. Click New and the Medical Appointment Details screen will be displayed.

Step 6: Assume that the child has just returned from the appointment at which he received allergy shots and that we are entering the results. In reality, the appointment would probably have been entered in advance with a status of Scheduled, and the social worker would return here and change it to Completed before entering additional details. In any case, let's select Completed in the Status drop-down list and enter today's date in the Date field. Select Allergy in the Medical Type pick list.

Step 7: Next, enter the doctor's name into the Health Professional's Name field. Assume that Kiana's pediatrician is Dr. Jones. Enter his name in the appropriate field.

The screenshot displays the 'Medical Appointment Details' screen in the FACES.NET system. The left sidebar shows the 'In Focus' section with two entities: a Case named JACKSON (ID: 192557) and a Client named KIANA SCOTT (ID: 845174). The main content area is titled 'Appointments' and includes a 'Client Medical Appointments' table with columns for Current Primary Physician, Current Primary Dentist, DC KIDS MR#, and Created By (ASIMON). Below this is an 'Allergies' section with a dropdown arrow pointing to it. The 'Summary' tab is active, showing fields for Date (11/28/2005), Time (12:00), Medical Type (Allergy), Status (Scheduled), Health Professional's name (Dr. Jones), Agency, and Address. Asterisks (\*) denote required fields, and double asterisks (\*\*) denote half-mandatory fields. A legend at the top explains these symbols.

Figure 3.10

Note: This field and the Agency field are marked by asterisks. Remember that this indicates that one of the two must be filled out in order to proceed.

**DISTRICT OF COLUMBIA  
CHILD AND FAMILY SERVICES AGENCY**

FACES.NET

Referral Case Client Provider Admin

Case Client Health Appointments Medication Allergies Tests Insurance Gatekeeper

**Appointments - JACKSON**

\*Denotes required Fields \*Denotes AFCARS Fields

**Client Medical Appointments**

Current Primary Physician	Current Primary Dentist	DC KIDS MR#	Created By ASIMON
---------------------------	-------------------------	-------------	----------------------

**Allergies**

Summary Detail

**Diagnosis**

Dander [Select...]

Date/Time: 11/1/2005 00:00 Medical Type: Allergy

Other Specify

**Brief Summary, Recommendation**

Dental conditions (Dental Problems, Special Conditions)

Physical Exam (Include all Laboratory and Radiology Evaluations)

Developmental History

Specialty Update\*

Kiana has an acute allergy to pet dander.

Save Cancel

Figure 3.11



#### Notes:

- AFCARS data element #10 looks to the Diagnosis field to see if a client has a handicap or disability. Should the social worker choose one of the pre-defined disabilities, the client will be indicated as having a handicap on their general information screen;
- Medical screens will primarily be populated by data retrieved from Children's National Medical Center (CNMC) for children flagged as part of the DC Kids program;
- If a client's medical information was entered via the Children's National Medical Center, then the DC Kids MR# will be displayed at the top of the screen;
- If you had selected a different appointment type, different listing of options would be shown here from which to choose;
- The Details tab unlocks after a status of "Completed" has been selected.

## Medications

Steps Include:

Step 1: Enter new medication information for Kiana. First, make sure that Kiana is the active client. Then click Health, then Medications, to display the Medications screen.

The screenshot shows the FACES.Net Training Version 0.51.4 web application in Microsoft Internet Explorer. The browser address bar shows 'http://10.9.64.81 - FACES.Net Training Version: 0.51.4 - Microsoft Internet Explorer'. The application has a navigation menu on the left with 'Client' selected. The main content area is titled 'Medications' and contains several sections:

- Medications**: A section with a legend indicating field types: \* Denotes Required Fields, \*\* Denotes Half-Mandatory Fields, # Denotes AFCARS Fields. It includes fields for 'Current Primary Physician', 'Current Primary Dentist', 'DC KIDS MR#', and 'Created By'. Below these is an 'Allergies' field.
- Medication Information**: A table with columns 'Medication', 'Start Date', and 'End Date'. It contains one row with a blue background.
- Medication Details**: A section with a 'Medication\*' field and a 'Specify' dropdown. Below these are fields for 'Start Date', 'End Date', 'Dosage', and 'Frequency'. There are also fields for 'Prescribed By', 'Agency', 'Address', and 'Phone'. A 'Select...' button is located below the 'Address' field.

At the bottom of the 'Medication Details' section are buttons for 'New', 'Save', and 'Cancel'. The left sidebar shows the 'In Focus' section with 'User Name: TRAIN 24' and 'Entity Type: Case'. Below this, it lists 'Entity Name: JACKSON47' and 'Entity ID: 192627'. Further down, it lists 'Entity Type: Client', 'Entity Name: KIANA SCOTT', and 'Entity ID: 846012'. The bottom of the screen shows the Windows taskbar with the 'start' button and several open applications.

Figure 3.12

Click Find to select the type of medication for Kiana Scott, and then click Ok.

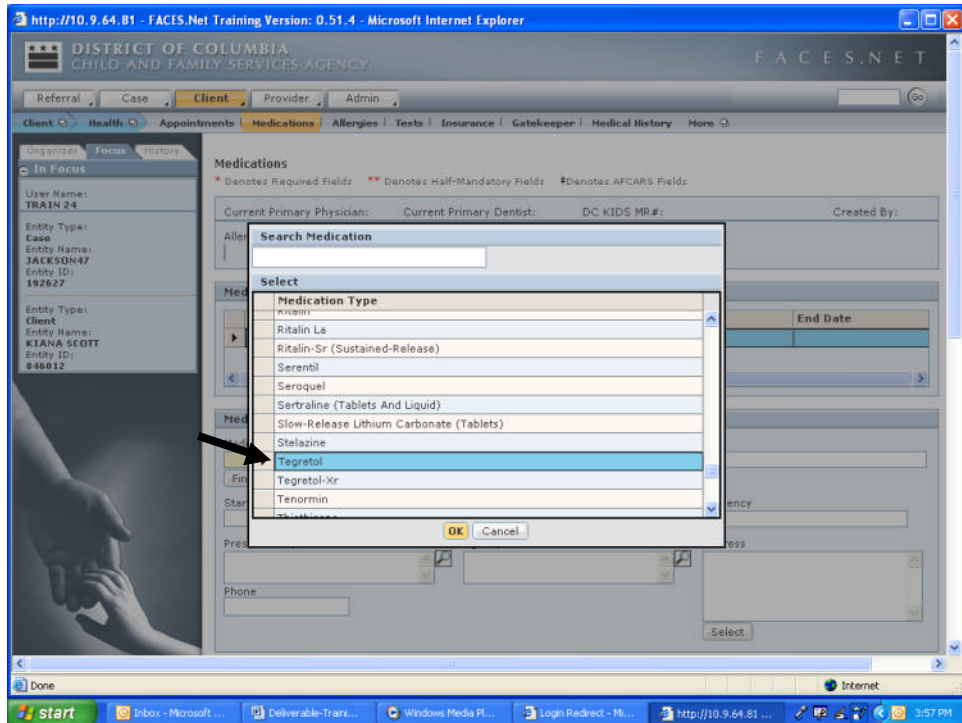


Figure 3.13

- Step 2: Entering additional details medication information including the Start Date Dosage, Frequency, Prescribed By, Agency and Address fields.
- Step 3: Click Save.

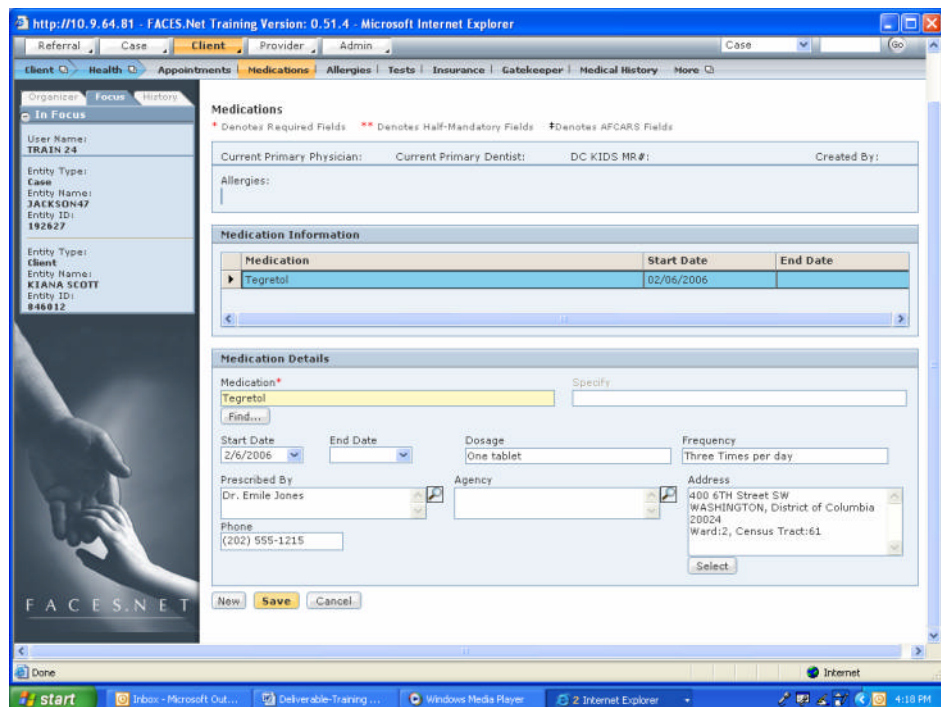


Figure 3.14

Step 4: Next, enter the doctor's name into the Health Professional's Name field. Assume that Kiana's pediatrician is Dr. Jones. Enter his name in the appropriate field.

## Allergies

Steps Include:

Enter Allergy information for your client by clicking on Allergies from the menu.

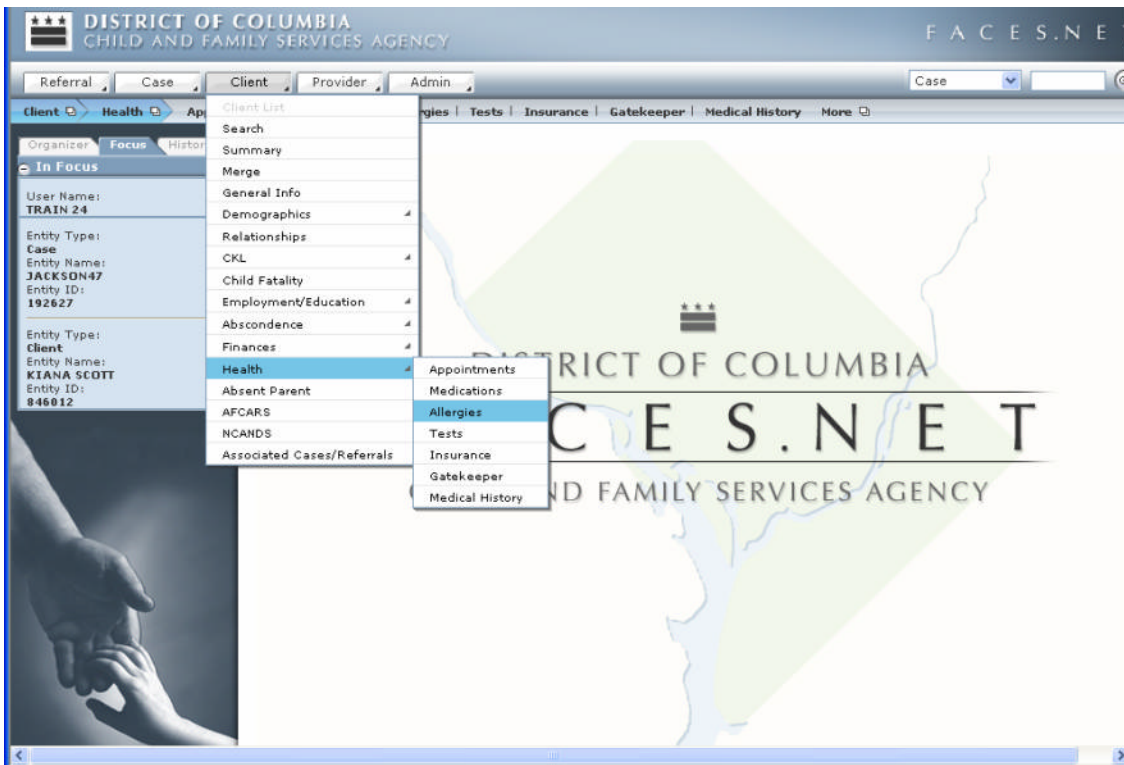
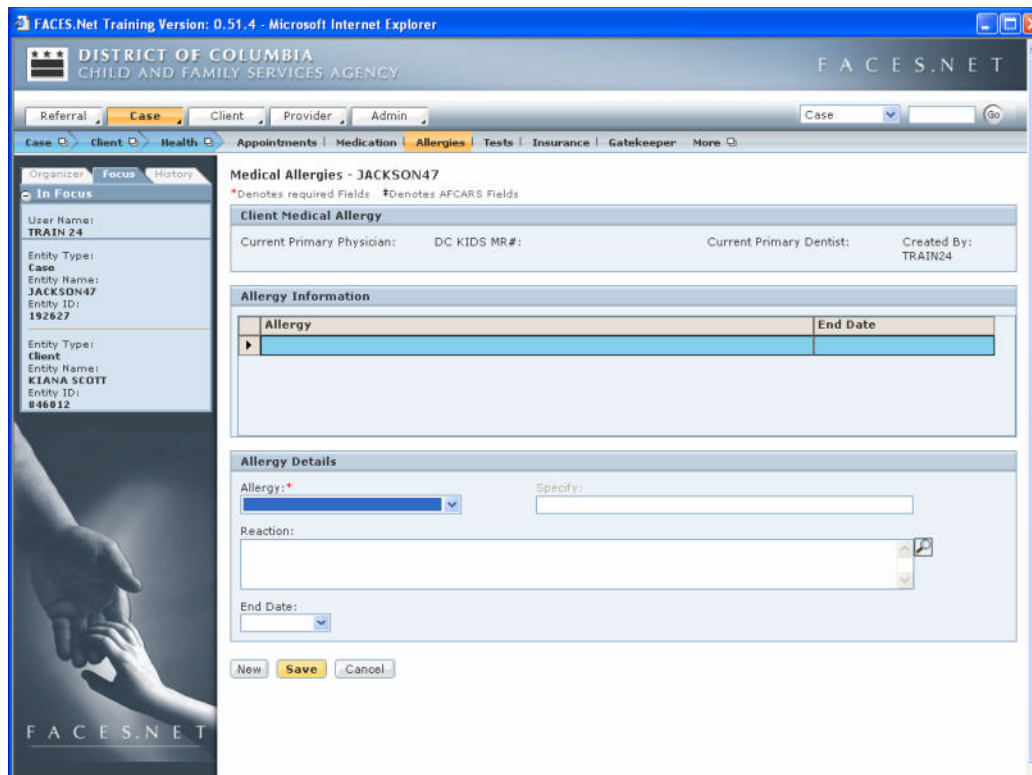


Figure 3.15

Step 1: Click the on the down arrow under the Allergy field to select an allergy for Kiana Scott.



The screenshot shows the FACES.Net Training Version 0.51.4 interface. The main window displays the 'Medical Allergies - JACKSON47' form. The form is divided into several sections: 'Client Medical Allergy', 'Allergy Information', and 'Allergy Details'. The 'Allergy' field in the 'Allergy Information' section is highlighted with a blue border, indicating it is the active field. The 'Allergy Details' section includes fields for 'Allergy:', 'Reaction:', and 'End Date:'. The 'Allergy:' field has a dropdown arrow, and the 'Reaction:' field has a magnifying glass icon. The 'End Date:' field has a date picker icon. The 'Save' button is highlighted in yellow.

Figure 3.16

Step 2: Click the magnifying glass to enter a Reaction for the allergy.

Step 3: Enter an end date, if the allergies cease.

Step 4: Click Save.



#### Points to Remember:

If there are additional allergies then click the New button to create a new record.

## Tests

Clients' Medical tests are recorded on the Medical Tests screen.

Steps Include:

Step 1: Enter the date of the test in the Date Tested field.

The screenshot displays the 'Medical Tests' interface within a web browser. The title bar indicates 'FACES.Net Training Version: 0.51.4 - Microsoft Internet Explorer'. The sidebar on the left shows the 'In Focus' section with user details: User Name: TRAIN 24, Entity Type: Case, Entity Name: JACKSON47, Entity ID: 192627, and Client: KIANA SCOTT, Entity ID: 846012. The main content area is titled 'Medical Tests' and includes a legend: \* Denotes Required Fields, \*\* Denotes Half-Mandatory Fields, # Denotes AFCARS Fields. Below this is the 'Client Medical Test' section with fields for Current Primary Physician, Current Primary Dentist, DC KIDS MR #, and Created By (TRAIN24). An 'Allergies' field is also present. The 'Test Information' section contains a table with columns 'Date Tested', 'Type', and 'Result'. The 'Test Result' section includes fields for Date Tested\*, Test Type\*, Tested By, Test Result, and a Narrative text area. At the bottom are 'New', 'Save', and 'Cancel' buttons.

Figure 3.17

Step 2: Click the drop-down in the Test Type field and select the test type.

Step 3: Select an appropriate option from the Tested By picklist.

Step 4: Select the test results from the Test Result picklist.

Enter comments on the Narrative field regarding the test results.

Step 5: Click Save.

Step 6: Repeat steps 1 through 6 to enter additional tests taken.

## Insurance

Clients' medical insurance information is recorded on the Client Medical Insurance screen.

Steps Include:

Step 1: Enter the appropriate type of insurance from the Insurance type picklist.

Step 2: Select and complete all appropriate fields under the Insurance tab.

The screenshot shows the FACES.Net Training Version 0.51.4 interface in Microsoft Internet Explorer. The title bar indicates the browser is displaying the FACES.NET application. The main header shows the District of Columbia Child and Family Services Agency logo and the FACES.NET logo. The navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. The Case tab is selected, and the sub-tab is Insurance. The left sidebar shows the Organizer, Focus, and History sections. The Focus section displays the current case information: User Name: TRAIN 24, Entity Type: Case, Entity Name: JACKSON47, Entity ID: 192627, and Client Information: Entity Type: Client, Entity Name: KIANA SCOTT, Entity ID: 846012. The main content area is titled "Client Medical Insurance - JACKSON47" and includes a legend for required fields (\*). The Insurance tab is selected, showing a table with columns for Insurance Name, Company/HMO, Policy Number, and Policy Holder Name. Below the table, the Insurance form is displayed with fields for Insurance type (a dropdown menu), Other Medical Coverage, a checkbox for "Is child Covered under Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) Insurance?", Company/HMO, Policy Number, Begin Date, End Date, and Group No. The form has New, Save, and Cancel buttons at the bottom.

Figure 3.18

Step 3: Enter information on the Contact Info, Policy Holder and Medicaid tabs.

Step 4: Click Save.



## AFCARS

To add, view or update AFCARS information for a client, click on the AFCARS button. AFCARS information will be discussed throughout the FACES.NET guide, but covered in detail in Section 14 (Federal Reporting).

## NCANDS

To add, view or update NCANDS information for a client, click the NCANDS button. NCANDS information will be covered in detail in Section 14 (Federal Reporting).

## Record Client Contacts

Whenever a social worker either attempts or completes a contact with anyone involved in a case (Client, Provider, Collateral, or Others), it is recorded on the Case - Contacts screen in FACES.NET. An attempted contact is when actual communication is not made with the client. A completed contact is when communication is made with the client. Remember that in order to show reasonable efforts, attempted contacts should always be recorded even if the social worker did not see the client or the non-client participant.

In the following steps, we will enter a contact in FACES.NET detailing a visit made by a social worker of the Jackson family.

### Create New Contact

Steps Include:

Step 1: Place the cursor over the Case menu and click Contacts.

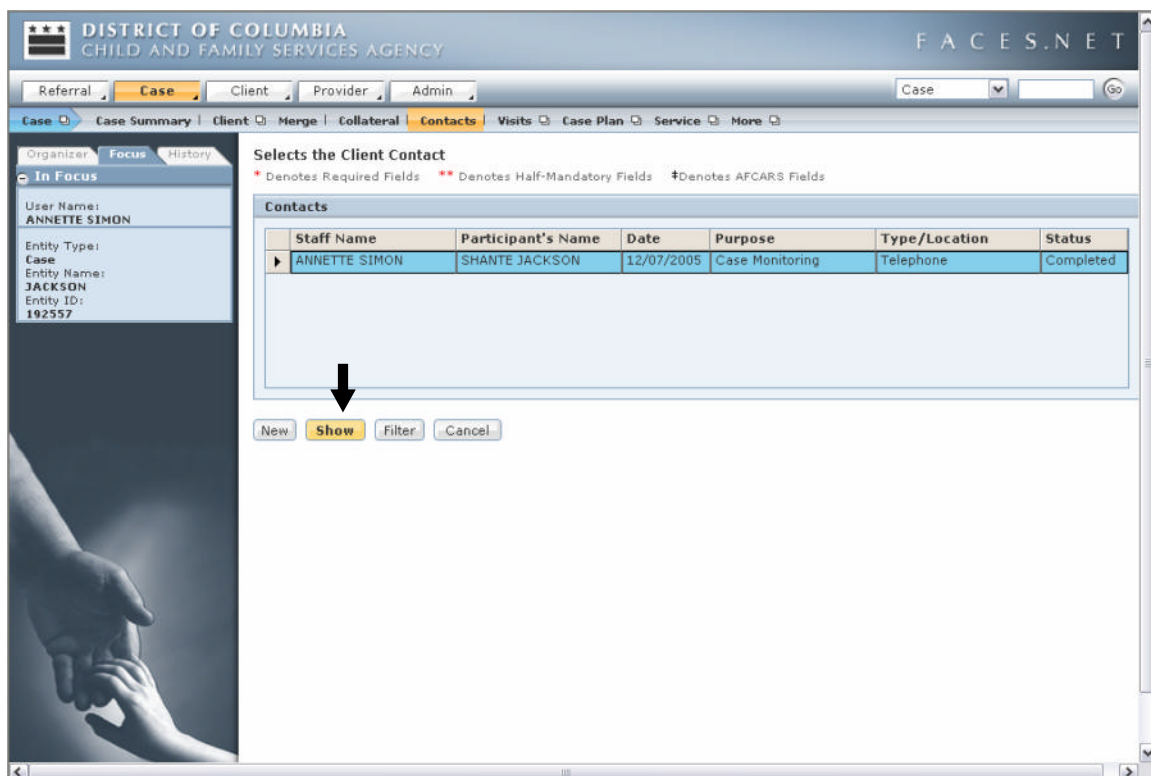


Figure 3.20

Step 2: Click New. (This will take you to the Contacts screen, containing two tabs)

## General Information Tab

The Staff Name field will default to the worker inputting the information. If you are an SSA entering the contact on behalf of the social worker, then click the Find button to search for the worker's name that actually made the contact/visit.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. The 'Case' tab is active, and the 'Contacts' sub-tab is selected. A sidebar on the left shows the user's name as ANNETTE SIMON and the entity name as JACKSON. The main content area is titled 'Selects the Client Contact' and features a 'Contact History' table. Below this, the 'General Information' tab is active, showing fields for Staff Name (ANNETTE SIMON), Type / Location (Face to Face (Home)), Source (Case), Date (1/1/2006), Time (03:00), Status (Completed), Duration (00:00), and Travel Time (00:00). The 'Clients Discussed' section lists KEYSHAWN JACKSON. The 'Contact Participants' section includes fields for Client/Collateral (SHANTE JACKSON) and Non-Client/Non-Collateral Participants. At the bottom, there are buttons for New, Save, Cancel, and Find.

Staff Name	Location/Type	Contact Status	Source	Updated Date
ANNETTE SIMON	Face to Face (Home)	Completed	Case	

**General Information**

Staff Name: ANNETTE SIMON

Type / Location\*: Face to Face (Home)

Source: Case

Date\*: 1/1/2006

Time\*: 03:00

Status: ☐ Attempted ☒ Completed

Duration: 00:00

Travel Time: 00:00

**Clients Discussed**

KEYSHAWN JACKSON

**Contact Participants**

Client/Collateral\*\*: SHANTE JACKSON

Non-Client/Non-Collateral Participants\*\*

Figure 3.21

Steps Include:

- Step 1: Change the Status of the contact to Completed by clicking the radio button.
- Step 2: Choose Face to Face (Home) as the location of the visit in the Type/Location field, indicating that this visit took place at the client's home.
- Step 3: Enter the date and time of the contact.
- Step 4: Select Keyshawn under Clients Discussed. This section is for recording the clients discussed during the visit.

Step 5: Click the Select button in the Contact Participants section and select Shanté from the Client select box. This section is for recording actual participants in the visit.



Notes:

- Collaterals and Providers associated with a case can also be listed as contact participants by selecting the appropriate radio button within the contact participants select button.
- A client participating in the visit need not be discussed, and a client discussed need not participate – these fields are independent of each other. Remember particularly to select a client present at the visit in the Contact Participants section of this screen, even if you have already selected him or her in the Clients Discussed section. If you do not, you will not receive credit for the visit.

## Purpose and Comments Tab

Step 1: Click the Purpose and Comments tab.

DISTRICT OF COLUMBIA  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Case Summary Client Merge Collateral Contacts Visits Case Plan Service More

Organizer Focus Utilities

WorkLoad

- My Assignments
- My Workers
- My Units
- Other Program Areas

My Calendar

November 2005

S	M	T	W	T	F	S
30	31	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3
4	5	6	7	8	9	10

My Tasks

Selects the Client Contact - JACKSON

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

Staff Name	Location/Type	Contact Status	Source	Updated Date
ANNETTE SIMON		Completed	Case	

General Information Purpose & Comments

Purpose

Assessment

Select

Type of Contact

Select

Comments\*

Noone was at home to complete initial visit. This worker will contact family at a later time to reschedule.

New Save Cancel Find

Figure 3.22

Step 2: Click the Select button below the Purpose box.

Step 3: Click Assessment in the list of purposes that appears, as well, as any other desired options.

Step 4: Click the Select button next to the Type of Contact box.

Step 5: Enter comments detailing the visit in the Comments field.

Step 6: Click Save.

Step 7: A verification message will appear: "The initial version of this contact will become read-only once it is saved. Changes can be made, but will be recorded as amendments to the original contact record". Click OK to verify the save or click Cancel to return to the screen to edit.



Note: Please refer to the modified final order and Best Practice Implementation Plan in LaShawn A. vs. Williams for policies and guidelines concerning the frequency of visits to children. This information can be found on the CFSA Intranet.



Points to Remember:

- Remember that contacts/visits must be recorded in FACES.NET prior the 15<sup>th</sup> day of the following month, so record your visits in a timely manner. (i.e.: Visits that occurred in January must be entered by February 14<sup>th</sup>)
- Special attention should be given to ensure that you select only active clients in the case.
- Always include all the Clients that were present in the Contact Participant grid.
- Verify that the proper client is indicated as the caretaker on the relationship screens so that the correct information populates on the contacts/visits management reports.

# Notes

# SECTION 4: FEDERAL REPORTING

## Performance Objectives

In this Section, you gain confidence in your ability to:

- g Verify Compliance with AFCARS Reporting Requirements
- g Verify Compliance with NCANDS Reporting Requirements
- g Verify Compliance with IV-E Reporting Requirements
- g Verify Compliance with TCM Reporting Requirements



(This Page Intentionally Left Blank)



## FACES.NET Guide

AFCARS Adoptions and Foster Care Analysis and Reporting System were developed by the federal government to collect case level information on all children in foster care and on children who are adopted under the auspices of CFSA.

The District of Columbia, along with the other 50 States, must submit child-specific data to the Federal government semi-annually. The data that is submitted must reflect the data that is time-stamped in FACES.NET between the time periods of October 1 through March 31 (known as reporting period A) and April 1 through September 30 (known as reporting period B) of any given fiscal year.

Generally, a mock run of the AFCARS report is run 45 days prior to submission to the Federal Government to identify inconsistencies and non-compliance with AFCARS guidelines. Non-compliance includes missing or inconsistent (i.e., child is 100 years old and in foster care or mother is younger than the child). Non-compliance is 10% of the data on any one of the 66 data elements is missing or data has been entered into FACES.NET more than 60 days after its occurrence (i.e., child discharged from foster care and the date that the home return date or placement date is entered into FACES.NET is 60 days or greater after the event.). AFCARS reports are generated daily to assist with identifying non-compliant data elements for the current AFCARS reporting period.

### Verifying AFCARS Compliance Reporting

This section will assist you in determining how to assure that your case data is AFCARS compliant.

The key tasks associated with improving and assuring that your foster care or potential adoptive child-specific data is accurate, you should:

1. Review the daily AFCARS online report (AFC002MS) "AFCARS ACF Compliance Data for Case Management" via the Web.
2. Review the AFCARS data entry Screens at least quarterly.

## Web Reports for Social Workers

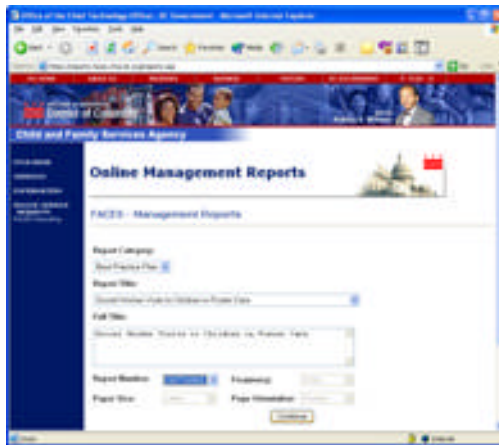


Figure 4.1

Steps include:

Step 1: Review the AFCARS inconsistency report.



Note: AFCARS fields are identified in blue in FACES.NET.

### FACES.NET Scenario

AFCARS – Foster Care Element 5 is found to be out of compliance when one of the following has not been done in FACES.NET for a child in foster care during the reporting period:

- Court hearing has not been held;
- Administrative review has not been held;
- Administrative review summary has not been completed.

The data cleanup for no hearings held should be minimal since the hearing schedule is interfaced via the DC Superior Court. The following is report AFC002MS and is consisting of children that are out of compliance due to the lack of recorded court hearing and administrative review data during the AFCARS reporting period.

Microsoft Excel - afc002ms

File Edit View Insert Format Tools Data Window Help

Type a question for help

New Roman 16 B I U

E6 AFCARS - Foster Care ACF Compliance Data for Case Management

	A	B	C	D	E	F	G	H	I	J	K	L
6					<b>AFCARS - Foster Care ACF Compliance Data for Case Management</b>							
7					<b>As of August 08, 2005</b>							
8												
9												
10												
11												
12												
13	<b>Data Type : ACF Out of Compliance Data</b>				<b>Date of Review:</b>							
14	<b>Administrator :</b> Trainer1				<b>Reviewer's Name:</b>							
15	<b>Program Manager :</b> Trainer2				<b>Case ID#:</b> 123456							
16	<b>Supervisor :</b> Trainer3				<b>Client ID#:</b> 654321							
17	<b>Social Worker:</b> train				<b>Child's Name:</b> Keyshawn Jackson							
18	<b>Instructions: Please review and correct any inaccurate data in FACES. The AFCARS Foster Care data below is for the clients that are assigned to you and sub that applies to your client. The Screen Location" column can be used to assist you in navigating to the FACES screen for data entry.</b>											
19												
20												
21					<b>AFCARS Data Element</b>		<b>Data from AFCARS</b>		<b>Screen Location</b>			
22	5.	Most Recent Periodic Review Date			Missing				Admin Review: Oversight/AR/AR Sched; Court Hearing: Cou			
23	6.	Date of Birth			09/01/1991				Client/Info (Client tab)			
24	7.	Sex			Male				Client/Info (Client tab)			
25	8 a.	Race American Indian or AlaskanNative			Does Not Apply				Client/Info (Other tab)			
26	8 b.	Race Asian			Does Not Apply				Client/Info (Other tab)			
27	8 c.	Race Black or African American			Applies				Client/Info (Other tab)			
28	8 d.	Race Native Hawaiian or Pacific Islander			Does Not Apply				Client/Info (Other tab)			
29	8 e.	Race White			Does Not Apply				Client/Info (Other tab)			
30	8 f.	Race Unable to Determine			Does Not Apply				Client/Info (Other tab)			
31	9.	Hispanic Origin			No				Client/Info (Other tab)			
32	10.	Child Diagnosed with Disabilities			No				Client/Info (Other tab)			
33	11.	Mental Retardation			Does Not Apply				Client/Health/Appts (Detail tab)			
34	12.	Visually or Hearing Impaired			Does Not Apply				Client/Health/Appts (Detail tab)			
35	13.	Physically Disabled			Does Not Apply				Client/Health/Appts (Detail tab)			
36	14.	Emotionally Disturbed			Does Not Apply				Client/Health/Appts (Detail tab)			
37	15.	Other Diagnosed Conditions			Does Not Apply				Client/Health/Appts (Detail tab)			
38	16.	Child Ever Been Adopted			No				Placement/Place/Enter (Entry Details tab)			
39	17.	Age of Child When Adopted							Placement/Place/Enter (Entry Details tab)			
40	18.	Date of First Removal from Home			02/16/2001				Removal			
41	19.	Total No of Removals			11				Removal			

16 4 3 2 1 AFC002MS - Ver 1.3

Figure 4.2

After receiving the online reports, enter the missing information into FACES.NET. For example, if report AFC002MS indicates that a goal is missing, a permanency goal should be created in the Perm Plan (permanency plan) screen.

Step 1: Review the AFCARS data entry screen.

The AFCARS screen should be reviewed to ensure that AFCARS related information is entered. For example, the clients' sex, race, and ethnicity can easily be entered at the time of adding the client to the system.

After selecting a client, select the AFCARS button from the Client drop down menu. (See Figure 4.3)

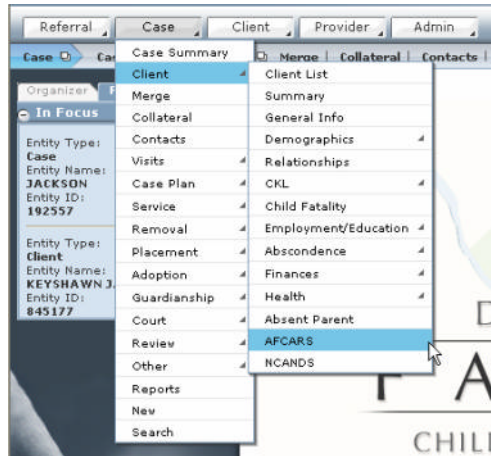


Figure 4.3

Review each tab to ensure that the social worker did not omit any information that could be provided. Click the Missing Information button to view a list of missing AFCARS related information. (See Figure 4.4)

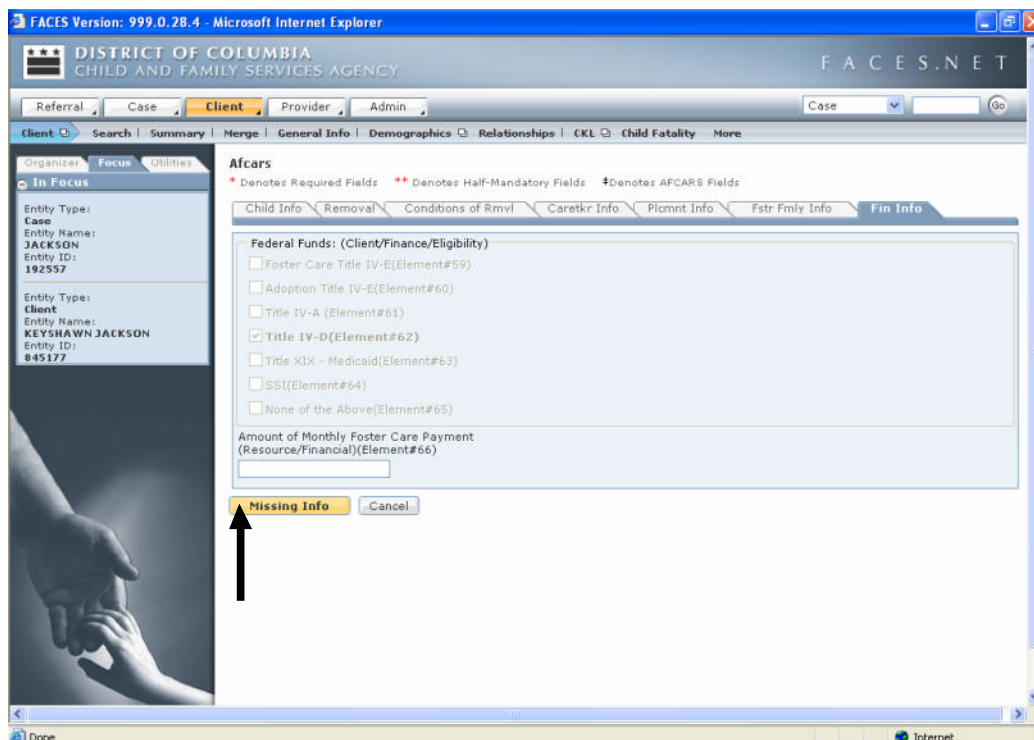


Figure 4.4

For more information about AFCARS please see: <http://www.acf.hhs.gov/programs/cb/dis/afcars> and the electronic form of the CFSA's Policy and Procedures.

## NCANDS

The National Child Abuse and Neglect Data System (NCANDS) is the primary source of national information on abused and neglected children known to State child protective services agencies. This system is a voluntary national data collection and analysis program that was created as part of the Child Abuse Prevention and Treatment Act, and implemented by the U.S. Department of Health and Human Services. By compiling relevant information about child abuse and neglect, NCANDS contributes to the creation of effective child protective services policy and programs.

### Two Main NCANDS Components

The NCANDS collects data, aggregate data, and referral level data on children who are subjects of reports of alleged maltreatment.

CFSA must report the following:

- The number of children and families receiving preventive services;
- The number of reports and investigations of child abuse and neglect;
- The number of victims of maltreatment;
- The number of child fatalities.

NCANDS submission consists of automated case records generated by FACES.NET. The case-level data submitted to NCANDS includes the age and sex of all children in a report, types of maltreatment, risk factors, services provided, and characteristics of perpetrators.

### Reports

Each year, the Children's Bureau within DHHS publishes an annual report and analysis of the most recent NCANDS data. The most recent NCANDS report, *Child Maltreatment*, compares data from previous years.

NCANDS data is used in other nationwide child safety reports. The *Annual Child Welfare Outcomes Reports* contains data on each State's progress toward improving the safety, permanency, and well being of the nation's children. In that report, the NCANDS is used to measure State progress in reducing the recurrence of child abuse and neglect. In addition, NCANDS data is incorporated into State Child and Family Services Reviews. The purpose of these reviews is to ensure conformity with the State plan requirements in Titles IV-B and IV-E of the Social Security Act, and to help States improve child welfare services and outcomes for families and children who receive services.

## Helpful Websites

Child Maltreatment

<http://www.acf.hhs.gov/programs/cb/publications> or  
<http://www.acf.hhs.gov/programs/cb/publications>

Child Welfare Outcomes Annual Report

<http://www.acf.hhs.gov/programs/cb/publications>

National Data Archive on Child Abuse and Neglect

<http://www.ndacan.cornell.edu>

For further reference to NCANDS requirements see the electronic form of the CFSA's Policy and Procedures through the Help menu of the FACES.NET system.

## FACES.NET Guide

This section reviews what needs to be done in FACES.NET to review whether proper NCANDS information has been entered in to FACES.NET.

Review the NCANDS screen(s).

Steps include:

Step 1: Place the cursor over Client and click NCANDS.

Step 2: Review the NCANDS screen.

Ensure that race, ethnicity, living arrangements, and family military background is entered if known. Click the Missing Information button to view a list of missing NCANDS related information. (See Figure 4.5)

The screenshot shows the FACES.NET interface in a Microsoft Internet Explorer browser window. The title bar reads "FACES Version: 999.0.28.4 - Microsoft Internet Explorer". The page header includes the "DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY" logo and the "FACES.NET" text. A navigation bar at the top has tabs for "Referral", "Case", "Client" (which is highlighted), "Provider", and "Admin". Below this, a secondary navigation bar shows "Client" selected, with sub-tabs for "Search", "Summary", "Merge", "General Info", "Demographics", "Relationships", "CKL", "Child Fatality", and "More". On the left side, there is a sidebar with "Organizer", "Focus", and "Utilities" sections. The "In Focus" section lists two entities: "Case" (Entity Name: JACKSON, Entity ID: 192557) and "Client" (Entity Name: RODNEY SCOTT, Entity ID: 845175). The main content area is titled "NCANDS" and contains a form for "Child Info". The form is divided into several sections: "Personal Information" (Name: RODNEY SCOTT, Case Number: 192557, Client Number: 845175), "Demo" (Gender: Male, Date Of Birth: [empty], Was Child Prior Victim: No), "Race" (Hispanic/Latino Origin: No, Primary: Black or African American, Secondary: [empty]), "Living Arrangement" (Current Living Arrangement: [empty], Is Child From Military Family: No), and "Disabilities" (a list of checkboxes for Physical Disabilities, Learning Disabilities, Emotionally Disturbed, Alcohol Abuse, Drug Abuse, Visually/Hearing Impaired, Behaviour Problem, Other Medical Condition, and Mental Retardation). At the bottom of the form, there is a "Missing Information" button and a "Cancel" button. An arrow points to the "Missing Information" button.

Figure 4.5

## Title IV-E Overview

Title IV-E is a subpart of Title IV of the federal Social Security Act to help States provide proper care for eligible children who need placement outside their homes, in a foster family home or an institution. This program provides funds to States to assist with:

1. the costs of foster care maintenance for eligible children;
2. administrative costs to manage the program; and
3. training for staff, for foster parents and for private agency staff.

Title IV-E benefits are an individual entitlement for qualified children who have been removed from their homes. Federal financial participation in State expenditures for foster care maintenance is provided at the Medicaid match rate for medical assistance payments. This rate varies among States from 50 percent to 78 percent. The District of Columbia's matching rate is 50 percent for monthly payments to families and institutions made on behalf of foster children. Federal financial reimbursement for administrative costs is made at a 50 percent match rate and at a 75 percent rate for State training expenditures. The District makes a quarterly report to the Federal Government to make claims for all three types of reimbursement. This quarterly report is an aggregate expenditure and claim reimbursement total.

There are two major concepts within the Title IV-E program that determines whether federal reimbursement can be claimed for a child: Eligibility and Reimbursability. When a foster care IV-E determination is completed, a child is determined to be ineligible, eligible but not reimbursable, or both eligible and reimbursable. A child must be eligible in order to be reimbursable. The determination of IV-E eligibility and reimbursability for the child allows the state to claim federal IV-E reimbursement for the child's maintenance costs. The Title IV-E eligibility also allows the state to obtain federal Title IV-E reimbursement for administrative and training costs associated with the child.

**Title IV-E Eligibility:** Initial IV-E eligibility is determined based on information regarding the child's initial removal from his or her home, and the child welfare agency obtains legal responsibility for the child. Once a child is determined initially eligible, IV-E eligibility is re-determined annually for the child over the duration of the out-of-home care episode.

If a child is determined not ineligible, then the child is TITLE IV-E not eligible for the duration of the out-of-home care episode. If a child returns home for more than 6 months or if the agency's legal responsibility ends while the child is home, a new episode begins when the child re-enters out-of-home care and a new TITLE IV-E eligibility determination must be conducted.

**Title IV-E Reimbursability:** The child must be determined TITLE IV-E eligible and reimbursable for the state to claim Title IV-E reimbursement for the maintenance costs of the child. The agency managing the child's case and the court must meet certain TITLE IV-E procedural requirements for the child to be reimbursable. For children who meet IVE eligibility and reimbursability requirements, the federal government shares in the cost of:

- **Maintenance:** Maintenance costs are for payments associated with maintaining the child who has been removed from his/her home, including the room and board, applicable child care costs, and other supervision costs for licensed foster care, treatment foster care, shelter care, group home care and residential care centers. The child's placement must be with a licensed provider or facility to claim Title IV-E reimbursement. For Title IV-E eligible children, the federal share of maintenance costs is based on the federal rate for Title XIX Medical Assistance program benefits, which is approximately 58%.
- **Administrative Services:** The public child welfare agency will incur administrative costs when working with the child, the child's family, and the care provider. The Title IV-E program reimburses administrative costs associated with case managing children who have been removed from their homes. The amount of reimbursable administrative costs is determined using a random moment time study or other methods. The federal share of administrative costs is 50%, with the administrative reimbursement rate pro-rated by the percentage of children in out-of-home care who are IV-E eligible. The percentage of children in out-of-home care who are IV-E eligible is determined based on the ratio of IV-E eligible children to the total number of children in out-of-home care. Frequently, the percentage of IV-E eligible children is referred to as the state's IV-E "penetration rate." Fluctuations in the penetration rate affect the net rate of federal IV-E reimbursement for administrative costs.
- **Training:** Training costs for public child welfare activities qualify for an enhanced IV-E reimbursement rate. Allowable training costs include training for case workers to manage child welfare activities for children and for foster parents and facility staff who work with children. The Child Welfare Training Partnerships provide most IV-E training in the state. The federal share of eligible training costs is 75%, with the training reimbursement rate also pro-rated by the IV-E penetration rate.

The CFSA Determination Process: At CFSA, the determinations are made by a separate eligibility Unit, who is responsible for making all IV-E determinations. When making each determination the eligibility specialist interFACES.NET with the IV-E module in FACES.NET. The module provides the specialist with appropriate information, such as client name, DOB, household family composition at the time of removal, and court order details recorded in the system by the social worker or other program staff. The specialist makes the determination by following the module's sequence of steps and entering the required data. While making the determination the specialist reviews both hard copy data and electronic data already recorded in the system. This review assures that information is accurately recorded in the system, as the specialist reviews hard copy documents such court orders and court reports. The specialist verifies household income by reviewing tax records and TANF receipts through an ACEDS interface, as well as reviewing hard copies of any income-related documents. The module also allows the specialist to record the SSI eligibility of the client, so that this information is included in the determination.

Once a determination is initiated, the system allows the specialist or other appropriate user to stop and pick-up where he/she left off at a later time. The system also keeps an on-line

audit trail, which allows the specialist or other appropriate user to review any changes made to a determination. As the steps in the module are completed, the system makes calculations at each step to determine if the criterion for eligibility has been satisfied. Once the final determination has been made the client is classified as Ineligible, Eligible Reimbursable, or Eligible Not-Reimbursable. Claims for IV-E reimbursement are only made on clients that are classified as ER and placed in a licensed facility. All claims data is stored and owned by CFSA.

The IV-E unit keeps a hard copy file of all documents used to make each determination. These files are used by the specialists to keep track of all information used in making the initial determination and to provide supporting documentation for all re-determination. They are also used to resolve any data conflicts that may arise. Hard copy documents are also kept in the client's case file, which is held by the on-going social worker.

The IV-E unit also uses the module to make IV-E re-determinations. The re-determination is to be made either: annually; when there is an appropriate court order; or a change in the client's income to would call for a new determination to be made.

## AFCARS

AFCARS (Adoption and Foster Care Analysis and Reporting System) is a system instituted by the Federal government for measuring performance outcomes related to safety and permanency of children in Foster Care.

All states and the District of Columbia are required to submit AFCARS data semi-annually to the Administration for Children and Families (ACF). AFCARS fields are identified in blue in FACES.NET. Section 13 of this manual is dedicated to Federal Reporting, however elements are interwoven throughout the manual as it is, in case practice. (See Section 13 for more information.)

This screen summarizes the AFCARS mandatory fields within the case in focus.

Steps Include:

- Step 1: Place the cursor over the Client menu and click AFCARS.
- Step 2: Click the AFCARS button.
- Step 3: Fill in all possible fields on the first tab.
- Step 4: View information on all tabs.
- Step 5: Click the Missing Info button.
- Step 6: View the missing information pop-up box and note what information is missing and where you can go within FACES.NET to enter it.



Note: You may need to switch the client in focus and check the AFCARS information by navigation to Case • Client • Client List • Select Client • Show and repeat steps 1-6.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Case Client Client List Summary General Info Demographics Relationships CKL Child Fatality More

Organizer Focus Utilities

**In Focus**

Entity Type: Case  
Entity Name: JACKSON  
Entity ID: 192557

Entity Type: Client  
Entity Name: KEYSAWN JACKSON  
Entity ID: 845177

**Afcars**

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields \* Denotes AFCARS Fields

**Child Info** Removal Conditions of Rmvl Caretr Info Plcmnt Info Fstr Fmly Info Fin Info

**Personal Info**

Name: KEYSAWN JACKSON

Client Number (Element #4): 845177

Case Number: 192557

**Demographics**

Date of Birth (Element #6):

Gender (Element #7): Male

**Race**

Primary (Element #8): Black or African American

Secondary (Element #8):

Hispanic/Latino Origin (Element #9): No

**Adoption Information (Client General)**

Has this child ever been adopted? (Element #16): No

Age When Previous Adoption Legalized (Element #17): Not Applicable

Disabilities: [Client/Demo/Char]

Diagnosed (Element #10): ☐ Yes ☐ No ☐ Not Yet Determined

☐ Mental Retardation (Element #11)

☐ Emotionally Disturbed (Element #14)

☐ Physically Disabled (Element #13)

☐ Visually/Hearing Impaired (Element #12)

☐ Other Medical Condition (Element #15)

Missing Info Cancel

Figure 4.6

## Federal Reimbursements of Title IV-E and of the SSA

Title IV-E is a federal program that provides federal reimbursements for foster care, adoption assistance for special needs children, and related administrative costs. Title IV-E eligibility is determined on a one-time basis when the child enters foster care. The child does not automatically receive federal benefits; instead, certain criteria must be met in order for the child to be eligible.

FACES.NET shall notify the Title IV-E Eligibility specialist, within five (5) days after a child is placed. Title IV-E Eligibility specialist shall in turn notify Income Maintenance Administration.

### Criteria Necessary for Making an Eligible IV-E Determination

In order for a child to be determined eligible for an IV-E subsidy, the following factors must be met:

- Child must meet the criteria of the "Aid to Families with Dependent Children (AFDC) Relatedness Test" when the child is removed. The test considers the child's date of birth, citizenship, deprivation of parental support, household income, and the relationship of the child to the caretaker during the previous six months of removal;

- The court order authorizing the child's removal must contain language that states "reasonable efforts" were made to prevent removal of the child from his/her home and "continuation in the home would be contrary to the welfare of the child". That initial and commitment order is scanned into FACES.NET;
- Child must be placed with a licensed provider while in the custody of the agency;
- Child must also have correct home removal information entered in FACES.NET.

In order to produce maximum IV-E reimbursement for CFSA, the Eligibility specialists require certain documentation in each child's file to make IV-E determinations possible. This documentation includes:

1. All pertinent court orders relating to each home removal.
2. Copy of the birth certificate and Social Security card.

If these documents are not located in the child's file, the Eligibility specialists must return the file to the social worker. This information must be obtained before the determination can be completed.

The information entered in FACES.NET has an enormous impact on the amount of funding the agency will receive for child and family services. If the information entered in FACES.NET meets all the necessary eligibility criteria mentioned above, the agency receives maximum reimbursement for services provided to children. An increase in reimbursement from the federal government allows the agency to provide more services to children and families.

The IV-E Finance screens depend on entry of case information in FACES.NET to make a determination in the system. Fields from the following screens are linked to the IV-E screens and are essential for determining a child's eligibility:

- Client Information screen – Date of Birth, Citizenship, and Participating as Child;
- Removal screens – Date Removed from Caretaker, Type of Removal, Removed from, and Conditions of Removal;
- Court Order screens – Court Order Date, Associated Home Removal, Reasonable Efforts and Contrary to Welfare;
- Placement screens- CFSA can only obtain funding for children in paid placements.



**Points to Remember:**

Title IV-E reimbursement is another reason why it is so important for a social workers to carefully review removal and legal status information in the case. If caught early and fixed, mistakes can have little impact on the overall effect of federal reimbursement.

## Targeted Case Management (TCM)

CFSA receives federal reimbursements through Medicaid as a part of the Targeted Case Management Program (TCM). The TCM program assists individuals in gaining and coordinating access to necessary care and services appropriate to the needs of the individual. TCM services are referrals for service that assist recipients in accessing all medical, social, educational and other services appropriate to the child's needs.

Several million dollars (about \$450 per child per month) are recouped each year. However, the funds can only be claimed if certain activities take place and are correctly documented in FACES.NET. CFSA must submit its TCM claims to Medicaid on a monthly basis.

TCM funds may be claimed if a CFSA employee makes contact with a child who is currently in CFSA custody, or performs some other defined case management activity. The definition of a TCM event is fairly broad, and includes:

- Visiting the child in placement, or bringing them to a placement;
- Visiting the child in the hospital, or bringing them to the hospital;
- Taking the child to court;
- Preparing a child specific case plan;
- Requesting a demand payment on behalf of a child.

CFSA policy states that each child must be visited at least once every month (See Section 3 – Client Information and Contacts/Visits). As long as workers visit children each month and document the visits on the Contacts screen, the criterion for TCM claiming is fulfilled. However, we cannot claim for anything unless it is recorded. At the end of each month, FACES.NET prepares the TCM claim by extracting all possible TCM events for that month from its files. If performed case management activity such as contacts has not been entered in FACES.NET, the Agency loses potential reimbursement funds.



### Points to Remember:

At the end of each month, FACES.NET performs an extraction of all eligible events for each client with an existing home removal and placement episode. Social workers are expected to ensure that all monthly activities are entered into FACES.NET so those funds can be claimed for that particular month.

# Notes

(This Page Intentionally Left Blank)

# SECTION 5: SUPPORT TOOLS

## Performance Objectives

In this Section, you gain confidence in your ability to:

- g How to Enroll in Training
- g Accessing the Reports and File Cabinet
- g Accessing the Help Functionalities in FACES.NET
- g Create and View FACES.NET Alerts



(This Page Intentionally Left Blank)



# FACES.NET Guide

## Training

The Training section will teach you how to use the various Training screens in FACES.NET. Most of the screens within training will be used only by the training unit; however, social workers will be able to enroll in classes and view workshop information. New workers must complete the FACES.NET Health Services training (this course) or the FACES.NET Overview training. Transferring workers and those wishing to expand or refresh their knowledge of a specific part of the FACES.NET system can take courses focusing on narrower topics, such as CPS, Providers, or Adoption. The schedule of FACES.NET training courses is available monthly from the FACES.NET office via email.

## FACES.NET Scenario

Role: You are a social worker who wants to enroll in the FACES.NET Overview training class.

## Enroll in Workshop

The Enrollment screen is used to enroll individuals in training workshops. There are two types of workshops to enroll in, CFSA and non-CFSA. Either type of workshop requires a supervisory approval.

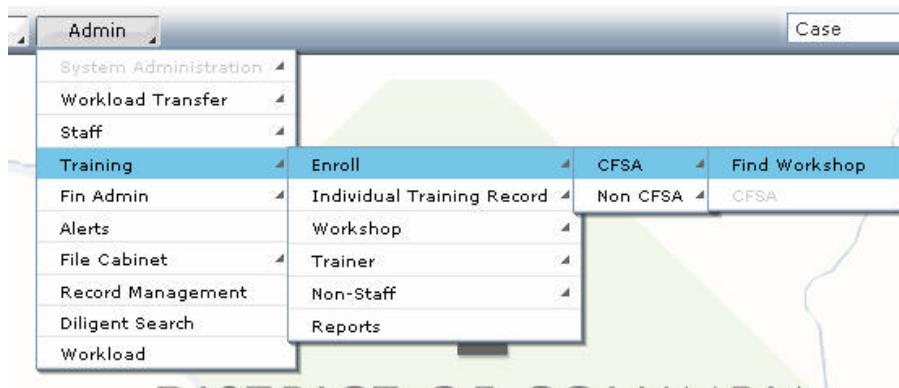


Figure 5.1

## Steps Include:

- Step 1: Place the cursor over the Admin menu, then Training, Enroll, CFSA, and click Find Workshop.  
The Workshop search screen displays.
- Step 2: Select "FACES.NET Overview" from the Workshop Title drop-down list.
- Step 3: Click the Find button to display the Workshop Search Results list in the inset grid.

**DISTRICT OF COLUMBIA**  
 CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin**

Case

Admin Training Enroll CFSA **Find Workshop** CFSA

Organizer Focus History
 

WorkLoad
 My Assignments

My Calendar
 January 2006
 

S	M	T	W	T	F	S
25	26	27	28	29	30	31
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

My Tasks

**Find Workshop**

\* Denotes Required Fields    \*\* Denotes Half-Mandatory Fields    † Denotes AFCARS Fields

**Workshop Search**

**Workshop Search Criteria**

Workshop Title

Program Area

Worker Level

Category

☐ Licensure Credit    ☐ Mandatory Courses    Workshop Number

☐ Workshop Dates
 

Start Date     End Date

**Workshop Search Results**

Titles	Location	Start Date	Start Time	End Date	End Time

Figure 5.2

Step 4: Select the workshop from the inset grid.

Step 5: Click the OK button.  
The Training breadcrumbs will refresh with a CFSA button.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin**

Admin Training Enroll CFSA Find Workshop CFSA

**Find Workshop**

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**Workshop Search**

**Workshop Search Criteria**

Workshop Title: **FACES.NET OVERVIEW** Program Area: [Dropdown]

Worker Level: [Dropdown] Category: [Dropdown]

☐ Licensure Credit ☐ Mandatory Courses Workshop Number: [Text Box]

☐ Workshop Dates

Start Date: [Text Box] End Date: [Text Box]

**Workshop Search Results**

Titles	Location	Start Date	Start Time	End Date	End Time
FACES.NET OVERVIEW		01/30/2006	08:15AM	03/31/2006	04:00PM

New **Ok** Find Cancel

Figure 5.3

Step 6: Click the CFSA button.  
The Training Enrollment CFSA screen displays.

Step 7: Click the Find Persons button to add yourself to the class.  
The Search Person screen displays.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin**

Admin Training Enroll CFSA Find Workshop **CFSA**

**Training Enrollment CFSA**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields \* Denotes AFCARS Fields

**CFSA Workshop Details**

Title: FACES.NET OVERVIEW Find Workshop

Workshop No: Enrollment Cut Off Date: 1/25/2006 Location: Session No:

Start Date: 1/30/2006 Start Time: 8:15 AM End Date: 3/31/2006 End Time: 4:00 PM

Number Enrollment: 0 Number Waitlisted: Total Capacity: Total Waitlist Capacity:

☐ Special Requirments to course Eligibility

**Enrollees**

Name	Status	Position / Provider Name	Program Area / Agency Na	Phone
------	--------	--------------------------	--------------------------	-------

**Find Persons** Remove Persons New Workshop Save Workshop Approval Cancel

Figure 5.4

Step 8: Click the Find button.

Step 9: Select yourself from the search results and click the Ok button.  
The Training Enrollment CFSA screen displays and previously selected person displays in inset grid.

The screenshot displays the 'Training Enrollment CFSA' interface. On the left is a sidebar with 'Organizer', 'Focus', and 'History' tabs, containing 'WorkLoad', 'My Assignments', 'My Calendar' (showing January 2006), and 'My Tasks'. The main area is titled 'Training Enrollment CFSA' and includes a 'Search Person' section. Under 'Person/Trainer Search Criteria', 'Staff' is selected. Search fields include 'By Name' (First: SALLY, Middle: , Last: SMITH), 'By Supervisor' (dropdown), 'By Program Area' (Placement Services Administration), and 'Start Date'/'End Date' (dropdowns). Below this is a 'Person/Trainer Search Result' table:

Name	Program Area
SALLY SMITH	Placement Services Administration

At the bottom are buttons: 'New', 'Ok' (highlighted with an arrow), 'Find', 'Clear', and 'Cancel'. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', and 'Admin' (selected). The top right shows 'FACES.NET' and a 'Go' button.

Figure 5.5

Step 10: Click the Approval button to create a request for approval to the supervisor.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin** Case [Go]

Admin Training Enroll **CFSA** Find Workshop CFSA

**Training Enrollment CFSA**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**CFSA Workshop Details**

Title: FACES.NET OVERVIEW [Find Workshop]

Workshop No: [ ] Enrollment Cut Off Date: 1/25/2006 Location: [ ] Session No: [ ]

Start Date: 1/30/2006 Start Time: 8:15 AM End Date: 3/31/2006 End Time: 4:00 PM

Number Enrollment: 0 Number Waitlisted: 0 Total Capacity: [ ] Total Waitlist Capacity: [ ]

☐ Special Requirements to course Eligibility

**Enrollees**

Name	Status	Position / Provider Name	Program Area / Agency Name	Phone
SALLY SMITH	Potential Enrollee	Placement Unit Social Worker	Placement Services Administration	()--

Find Persons Remove Persons New Workshop Save Workshop **Approval** Cancel

Figure 5.6

Step 11: Click the Request checkbox.

Step 12: Click the Ok button to send the approval request to the supervisor.

The screenshot displays the FACES.NET interface for the District of Columbia Child and Family Services Agency. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin. The Admin tab is active, and the left sidebar shows a navigation menu with options like Organizer, Focus, History, WorkLoad, My Assignments, My Calendar, and My Tasks. The main content area is titled "Training Enrollment CFSA" and contains an "Approval" section. This section includes a table with columns for Requesting Worker, Request Date, Approving/Denying Worker, and Approve/Deny Date. Below the table, there are input fields for Requesting Worker (SALLY SMITH), Requesting Date (Wednesday, January 18, 2006), Approving Worker (FORBES, JILL - Placement - Ms), and Approving Date. There are also checkboxes for Request, Approve, and Send Back, with the Request checkbox being checked. A Reason dropdown menu is also present. At the bottom of the form, there are OK and Cancel buttons. Arrows point to the Request checkbox and the OK button.

Requesting Worker	Request Date	Approving/Denying Worker	Approve/Deny Date
SALLY SMITH	Wednesday, January 18, 2006		

Requesting Worker: SALLY SMITH  
Requesting Date: Wednesday, January 18, 2006  
Approving Worker: FORBES, JILL - Placement - Ms  
Approving Date:   
Reason:   
☒ Request ☐ Approve ☐ Send Back  
Comments:   
OK Cancel

Figure 5.7

## Approve Enrollment Request

Steps Include:

- Step 1: Place the cursor over the Admin menu, then Training, Enroll, CFSA, and click Find Workshop.  
The Workshop search screen displays.
- Step 2: Select "FACES.NET Overview" from the Workshop Title drop-down list.
- Step 3: Click the Find button to display the Workshop Search Results list in the inset grid.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin** Case [Go]

Admin Training Enroll CFSA **Find Workshop** CFSA

**Find Workshop**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**Workshop Search Criteria**

Workshop Title: FACES.NET OVERVIEW (selected) Program Area: [dropdown]  
Worker Level: [dropdown] Category: [dropdown]  
Workshop Number: [text box]  
☐ Licensure Credit ☐ Mandatory Courses

☐ Workshop Dates  
Start Date: [dropdown] End Date: [dropdown]

**Workshop Search Results**

Titles	Location	Start Date	Start Time	End Date	End Time
--------	----------	------------	------------	----------	----------

New Ok **Find** Cancel

Figure 5.8

Step 4: Select the workshop from the inset grid.

Step 5: Click the OK button.  
The Training breadcrumbs will refresh with a CFSA button.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin**

Admin Training Enroll CFSA Find Workshop CFSA

**Find Workshop**

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**Workshop Search**

**Workshop Search Criteria**

Workshop Title: FACES.NET OVERVIEW Program Area: [Dropdown]

Worker Level: [Dropdown] Category: [Dropdown]

Workshop Number: [Text Box]

☐ Licensure Credit ☐ Mandatory Courses

☐ Workshop Dates

Start Date: [Text Box] End Date: [Text Box]

**Workshop Search Results**

Titles	Location	Start Date	Start Time	End Date	End Time
FACES.NET OVERVIEW		01/30/2006	08:15AM	03/31/2006	04:00PM

New **OK** Find Cancel

Figure 5.9

Step 6: Click the CFSA button.  
The Training Enrollment CFSA screen displays.

Step 7: Click the Approval button.

The screenshot shows the 'Training Enrollment CFSA' screen in the FACES.NET system. The interface includes a top navigation bar with tabs for Referral, Case, Client, Provider, and Admin (selected). Below this is a breadcrumb trail: Admin > Training > Enroll > CFSA > Find Workshop > CFSA. The left sidebar contains a 'WorkLoad' section with links to My Assignments, My Units, My Workers, and Other Program Areas. Below this is a 'My Calendar' section showing a calendar for January 2006. The main content area is titled 'Training Enrollment CFSA' and includes a 'CFSA Workshop Details' section with fields for Title (FACES.NET OVERVIEW), Workshop No, Enrollment Cut Off Date (1/25/2006), Location, Session No, Start Date (1/30/2006), Start Time (8:15 AM), End Date (3/31/2006), End Time (4:00 PM), Number Enrollment (1), Number Waitlisted (0), Total Capacity, and Total Waitlist Capacity. There is a checkbox for 'Special Requirements to course Eligibility'. Below this is an 'Enrollees' section with a table listing participants. The table has columns for Name, Status, Position / Provider Name, Program Area / Agency Name, and Phone. One participant, SALLY SMITH, is listed with Status 'Enrolled', Position 'Placement Unit Social Worker', and Program Area 'Placement Services Administration'. At the bottom of the screen, there are buttons for Find Persons, Remove Persons, New Workshop, Save Workshop, Approval (highlighted with a black arrow), and Cancel.

**Training Enrollment CFSA**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**CFSA Workshop Details**

Title: FACES.NET OVERVIEW

Workshop No:  Enrollment Cut Off Date: 1/25/2006 Location:  Session No:

Start Date: 1/30/2006 Start Time: 8:15 AM End Date: 3/31/2006 End Time: 4:00 PM

Number Enrollment: 1 Number Waitlisted: 0 Total Capacity:  Total Waitlist Capacity:

☐ Special Requirements to course Eligibility

**Enrollees**

Name	Status	Position / Provider Name	Program Area / Agency Name	Phone
SALLY SMITH	Enrolled	Placement Unit Social Worker	Placement Services Administration	( )--

Figure 5.10

Step 8: Click the Approve checkbox.

Step 9: Click the Ok button to save the enrollment approval.

DISTRICT OF COLUMBIA  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider Admin

Admin Training Enroll CFSA Find Workshop CFSA

Organizer Focus History

WorkLoad

- My Assignments
- My Units
- My Workers
- Other Program Areas

My Calendar

January 2006

S M T W T F S

25 26 27 28 29 30 31

1 2 3 4 5 6 7

8 9 10 11 12 13 14

15 16 17 18 19 20 21

22 23 24 25 26 27 28

29 30 31

My Tasks

- My Request
- My Approval Inbox
- My Alerts

Training Enrollment CFSA

\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields #Denotes AFCARS Fields

Approval

	Requesting Worker	Request Date	Approve/Deny/Send Back Worker	Approve/Deny/Send Back Date
▶	SMITH SALLY	1/18/2006 1:43:22 PM	FORBES, JILL - Placement - Management	1/18/2006 12:00:00 AM

Requesting Workers: SMITH SALLY

Requesting Date: 1/18/2006 1:43:22 PM

Approving Workers: FORBES, JILL - Placement - Ms

Approving Date: Wednesday, January 18, 2006

☒ Request ☐ Deny ☒ Approve

Reason:

Comments:

Figure 5.11

## View Workshop

The Workshop screens allow staff to view descriptions of available workshops and to enter evaluations for workshops attended.

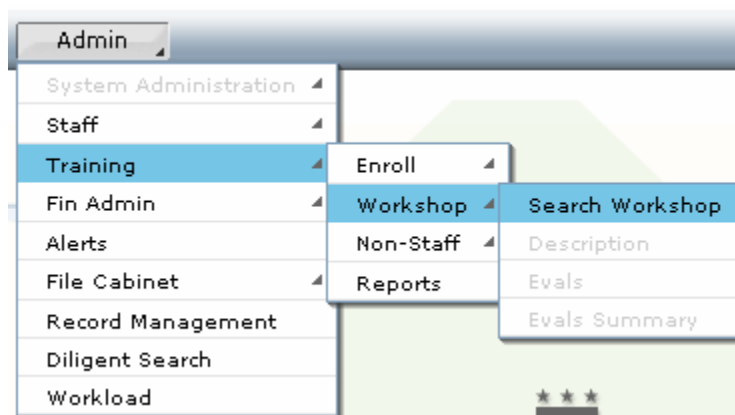


Figure 5.12

Steps Include:

- Step 1: Place the cursor over the Admin menu, then Training, Workshop, and click Search Workshop.  
The Find Workshop screen displays.
- Step 2: Enter the search criteria for a workshop and click the Required Course checkbox or click the Workshop Dates checkbox and enter Start and End dates. Do not fill out all fields – only fill out those necessary to find the workshop.
- Step 3: Click the Find button to display the Workshop Search Results list in the inset grid.
- Step 4: Select the workshop from the inset grid.
- Step 5: Click the OK button.  
The Training breadcrumbs will refresh Description, Evals and Evals Summary buttons.

**DISTRICT OF COLUMBIA**  
CHILD AND FAMILY SERVICES AGENCY

FACES.NET

Referral Case Client Provider **Admin** Case [Go]

Admin Training Workshop **Search Workshop** Description Evals Evals Summary

**Find Workshop**  
\* Denotes Required Fields \*\* Denotes Half-Mandatory Fields # Denotes AFCARS Fields

**Workshop Search**

**Workshop Search Criteria**

Workshop Title: FACES.NET OVERVIEW Program Area: [Dropdown]  
Worker Level: [Dropdown] Category: [Dropdown]  
Workshop Number: [Text Box]  
☐ Licensure Credit ☐ Mandatory Courses  
☐ Workshop Dates  
Start Date: [Dropdown] End Date: [Dropdown]

**Workshop Search Results**

Titles	Location	Start Date	Start Time	End Date	End Time
FACES.NET OVERVIEW		01/30/2006	08:15AM	03/31/2006	04:00PM

New Ok Find Cancel

Figure 5.13

Step 6: Click the Description button and view the detailed information on each tab, including the workshop description, title, type of training, category, and location information.

The screenshot shows the FACES.NET interface for the 'Training Workshop Description' form. The top navigation bar includes 'Referral', 'Case', 'Client', 'Provider', and 'Admin' (selected). Below this is a search bar with 'Case' and a 'Go' button. The main navigation tabs are 'Admin', 'Training', 'Workshop', 'Search Workshop', 'Description' (selected), 'Evals', and 'Evals Summary'. The left sidebar contains 'Organizer', 'Focus', 'History', 'WorkLoad', 'My Assignments', 'My Calendar' (showing January 2006), and 'My Tasks'. The main content area is titled 'Training Workshop Description' and includes a legend: '\* Denotes Required Fields', '\*\* Denotes Half-Mandatory Fields', and '† Denotes AFCARS Fields'. The 'WorkShop' tab is active, showing 'WorkShop Information' with fields for Title (FACES.NET OVERVIEW), Workshop No., Session No., Type of Training (Pre-Service Training), Program Area, Category (CFSA Staff Training), Other Specify, Required Materials, and Worker level/Prerequisites. There are 'Save' and 'Cancel' buttons at the bottom.

Figure 5.14

Step 7: Click the Evals button. This is where a worker can complete an evaluation for a specific workshop.

Step 8: Click the Eval Summ button. A worker can view the average results of all the evaluations submitted for the workshop in focus.



Note: Social workers do not have the security to view a list of individuals who are registered for a workshop.

## Alerts

Alerts are built-in FACES.NET reminders of scheduled events. This helps you to remember case related tasks and appointments. Alerts are automatically or manually generated reminders to workers to complete a task by a certain date. This segment will allow you to view Alerts and determine their priority and create alerts for new upcoming tasks.

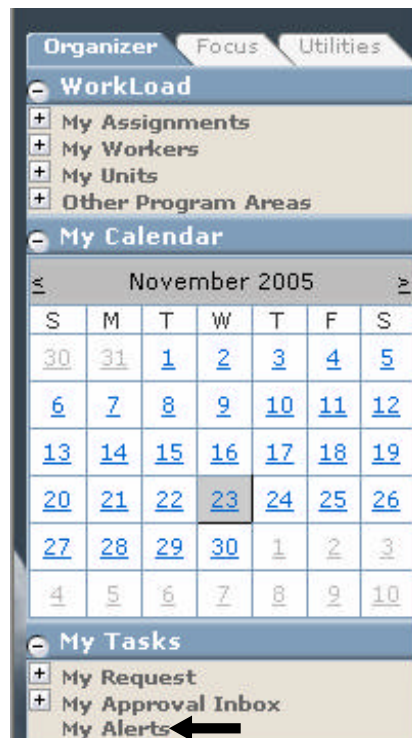


Figure 5.16

## FACES.NET Scenario

Role: As a social worker, you want to generate an Alert to remind you of an upcoming event.

### View Alerts

To view the Alerts associated with a particular case, you must have that case open in FACES.NET. In the following exercises, you will check existing alert status, create a new alert, and display the court calendar.

## Access Alert screen

### Steps Include:

- Step 1: To check the status of alerts in a case, first click the My Alerts link the left toolbar which is located under My Tasks.
- Step 2: The search for the alert or enter the case/referral ID for the alerts for a specific case.

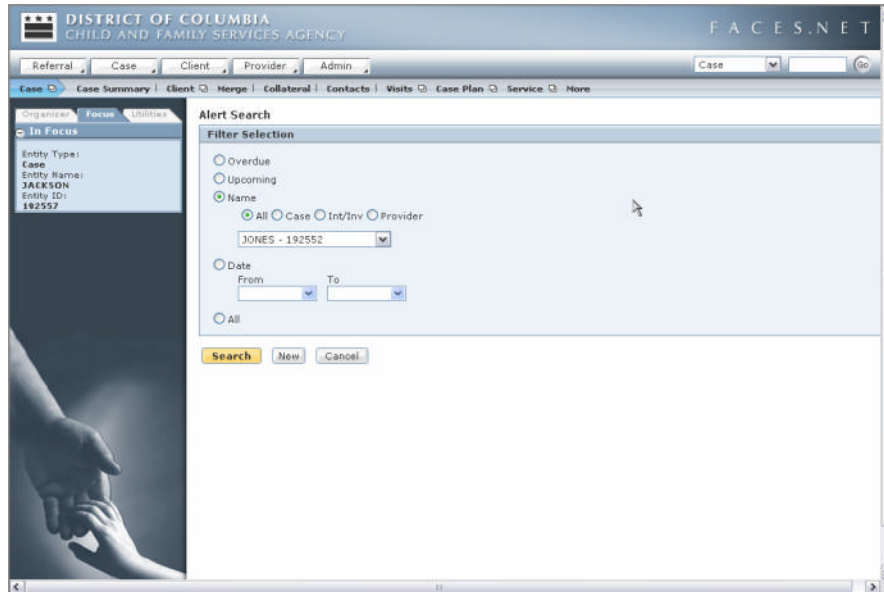


Figure 5.17

## View Existing Alerts

### Steps Include:

- Step 1: To find out what alerts currently exist for the open case, first click the My Alerts button on the left toolbar.

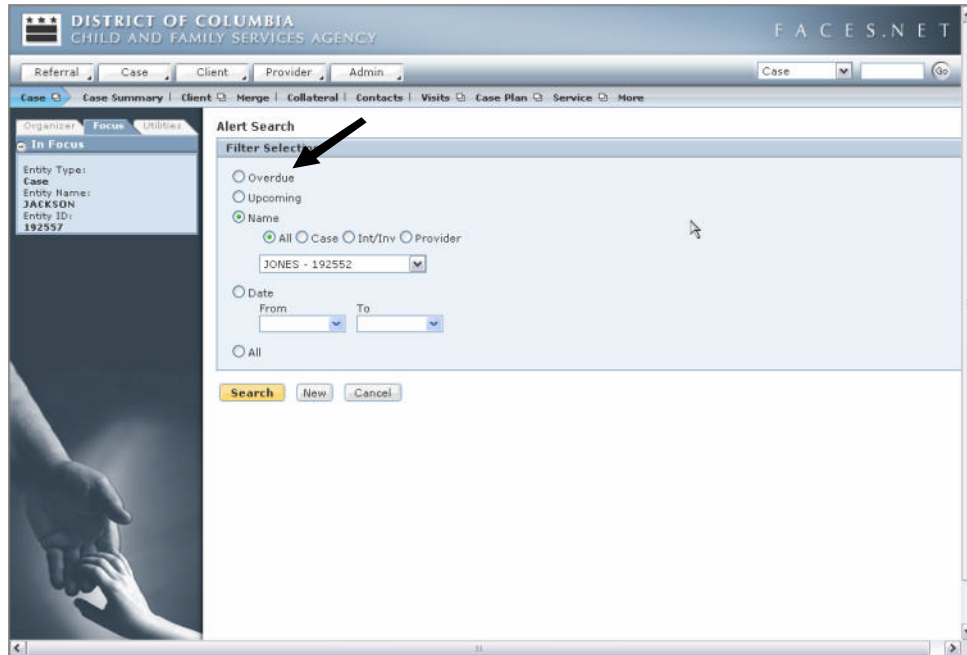


Figure 5.18

Step 2: Click the All radio button to display all alerts, or click the radio button corresponding to the desired filter criteria and fill out the required fields to filter the displayed alerts. Click Search to start searching.

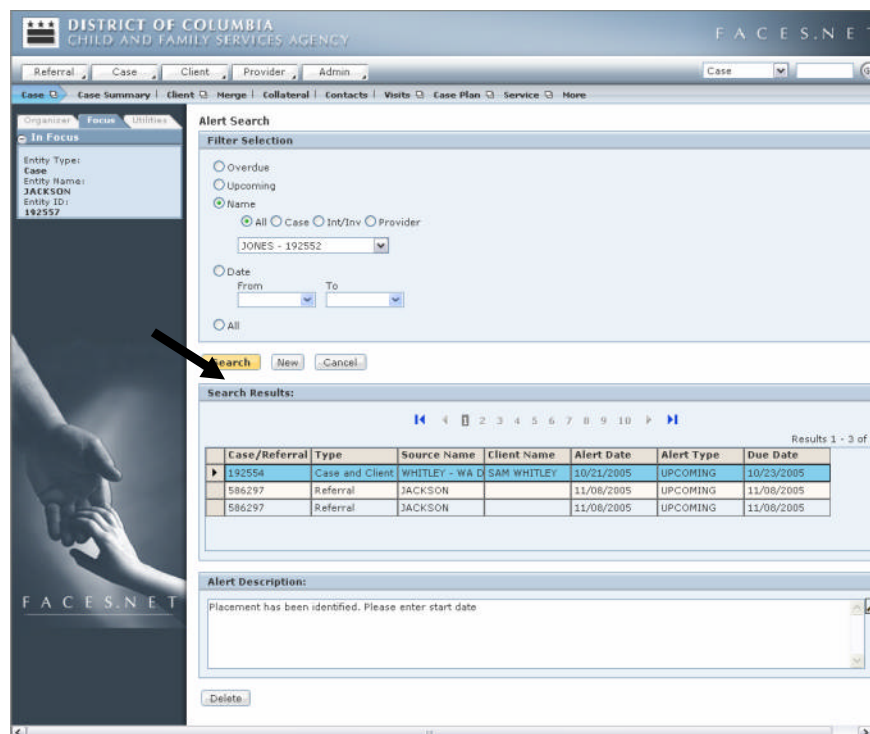


Figure 5.19

Step 3: The Alert Search screen displays all filtered alerts.

## Create New Alert

Alerts can also be created to remind you of any upcoming event in a case or other record in FACES.NET.

Steps Include:

- Step 1: Click the My Assignments from the left menu.
- Step 2: To create a new Alert, first click the New button on the Alert Search window.
- Step 3: Choose the radio button corresponding to the type of record the new Alert will be associated with. Then, choose the desired information in the Name, Client, and Due Date fields. Enter a description and click Save.



Notes:

- Due Date and Description are required fields.
- The Name automatically comes up. If that is not the name, then you use the drop down box and select the name you want.

A screenshot of the FACES.NET web application interface. The header shows 'DISTRICT OF COLUMBIA CHILD AND FAMILY SERVICES AGENCY' and 'FACES.NET'. Below the header is a navigation bar with tabs: Referral, Case, Client, Provider, Admin. The main content area is titled 'Alert Search' and contains a 'Filter Selection' section. This section has four radio buttons: 'Overdue', 'Upcoming', 'Name', and 'Date'. The 'Name' radio button is selected. Below it, there are three sub-radio buttons: 'All', 'Case', 'Int/Inv', and 'Provider'. The 'Case' sub-radio button is selected. A dropdown menu is open, showing 'JONES - 192552'. An arrow points to this dropdown menu. At the bottom of the 'Filter Selection' section are 'Search', 'New', and 'Cancel' buttons. On the left side of the window, there is a sidebar with 'In Focus' information: Entity Type: Case, Entity Name: JACKSON, Entity ID: 192557. The background of the sidebar shows a close-up of hands holding each other.

Figure 5.20

## Reports and File Cabinet

This segment clarifies how to retrieve, view and print reports from FACES.NET. FACES.NET generates several types of reports: On-line, Dynamic Data Exchange (DDE) and Template. In addition, Management reports are generated from FACES.NET data.

In order for the information in the reports to be meaningful, information in the system must be accurate and up-to-date. It is the worker's responsibility to enter detailed, up-to-date, and complete information into the FACES.NET system. Most functions in FACES.NET, Intake/Investigation, Case, Provider/Directory, Training, and Personnel, involve entering data that can be summarized in reports.

The File Cabinet is a storage bin for documents that relate to FACES.NET case, referral, assessment, and resource or staff person. The File Cabinet can contain FACES.NET-generated documents as well as Microsoft Word documents. By linking documents electronically, all users who have access to the File Cabinet have access to documents that relate to cases, referrals, assessments, etc. without sending electronic copies or checking out the physical case file.

In this segment, you will learn how to navigate in the File Cabinet, to place files appropriately in the File Cabinet and to move files among File Cabinet folders. The File Cabinet is accessed through the File Cabinet button on the main level toolbar. However, it is necessary to begin by bringing cases into focus in order to access File Cabinets for a specific case.

In the Jackson case, we will view a contact report, listing all of the contacts made in the case, or how to use the file cabinet to store additional case notes, letters, or other documents relating to the case. In the example FACES.NET Scenario below, we will examine a copy of the Court Report.

## On-line Reports

On-line reports are generated in FACES.NET and cannot be edited by workers. Staff should always “preview” an on-line report to review the report for accuracy before printing.

Steps Include:

Step 1: Bring a case into focus.



Figure 5.21

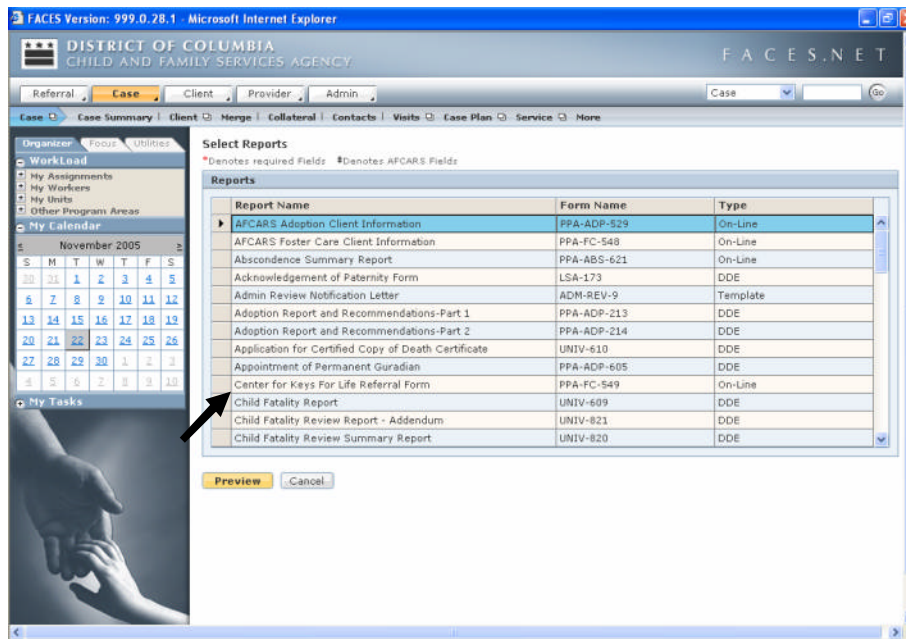


Figure 5.22

- Step 2: Click the Reports button.
- Step 3: Select the Contact On-line report. This report displays all contacts made between social workers and clients in the case that have been recorded in FACES.NET.
- Step 4: Click the Preview button to display a preview of the report.
- Step 5: Enter the date range, clients involved in the contact, staff members who performed the contact, or choose All.

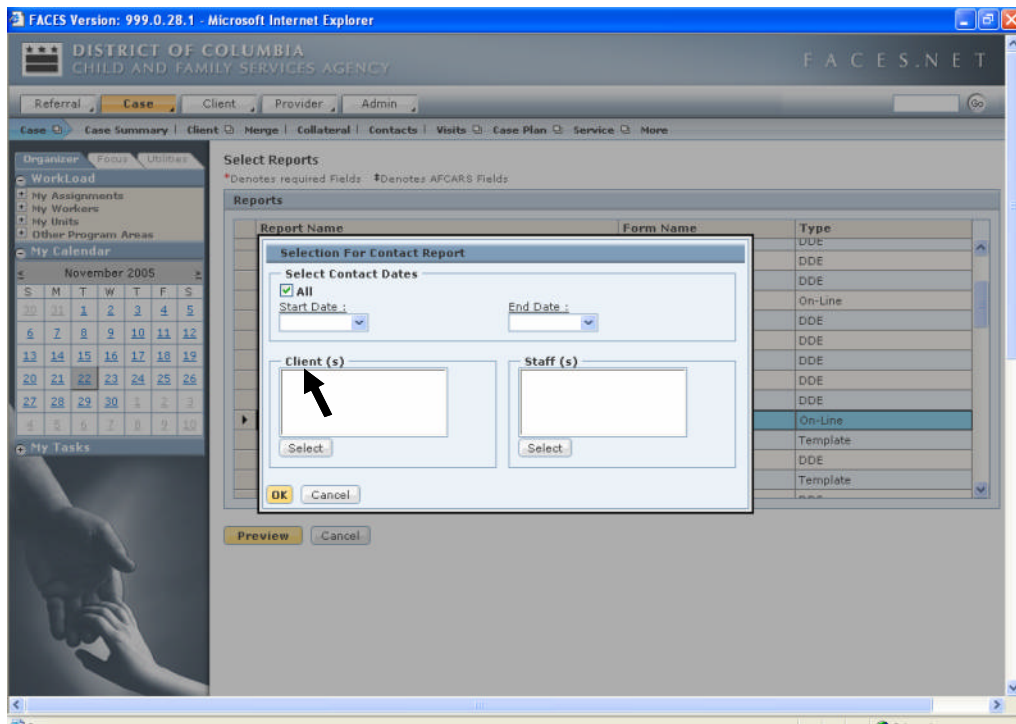


Figure 5.23

Step 6: Click OK.

Step 7: Review the report.



Note: As you page through the report, you see information that you entered in FACES.NET. Please do not print the report at this time.

## DDE Reports

Dynamic Date Exchange (DDE) Reports are generated in FACES.NET, but are reviewed, saved, and printed from Microsoft Word. The report can be edited in Word. However, only when the worker returns to FACES.NET and corrects the information on FACES.NET screens and re-generates the report is the report truly accurate. Examples of DDE reports include transfer summaries and ICPC requests. In the example below, we will view the Medical Assistance form 30-A.

Steps Include:

- Step 1: Place the cursor over Case and click Reports.
- Step 2: Highlight the Medical Assistance (FORM – 30A) report and click Preview.
- Step 3: Select one or more clients from the list, and click Preview.
- Step 4: The report will be exported to Microsoft Word. If the Microsoft Word window does not appear, click the Word icon on the taskbar to display the window.
- Step 5: A copy of the report can be saved or printed. To save the report in Microsoft Word:
  - Click the File button;
  - Click Save As;
  - In the appropriate field on the Save As pop-up window, enter a meaningful file name;
  - Click OK.



Note: Review the report for accuracy. CAUTION: Do not correct information just on the report. Correct inaccuracies in FACES.NET screens and re-run the report. Only then is the information on the report and in FACES.NET the same.

## Template Reports

A Template Report is very different from the other two reports just viewed. These are not reports generated with FACES.NET information. Rather, they are forms available to print and complete as necessary.

Steps Include:

- Step 1: Place the cursor over the Case menu and click Reports.
- Step 2: Select a Template report (choose Unusual Incident report).
- Step 3: Click the Preview button to display a preview of the report.
- Step 4: Wait until the report is completely generated.
- Step 5: The report will be exported to Microsoft Word. If the Microsoft Word window does not appear, click the Word icon on the taskbar to display the window.
- Step 6: Save the report in Microsoft Word.
  - Click the File button.
  - Click Save As.
  - In the appropriate field on the Save As popup window, enter a meaningful file name.
  - Click OK.



Note: After saving the report in Word, you are able to retrieve it again to review or print the report. You can also enter information directly into the Template report. You can save the completed Template (form) so that you can place it into the Case's File Cabinet. Please do not print the report at this time.

## Management Reports

Management reports allow supervisors, program managers and now social workers to track various statistics and measures of case management performance. For example, a management report can be generated that tracks which cases have current case plans. Management Reports are accessed through an icon on the Bread Crumbs tool bar that will only appear if you have the appropriate security level. Management reports are now available for social workers via the Internet. They are non-modifiable but may be printed.

The following is a sample of reports used by Social Workers:

### Case Plan

- CMT163 - Case Plans for CFSA Children in Foster Care As of ... Best Practices # VII.1
- CMT164 - Case Plans for Family Cases As of ... Best Practices # VII.1
- CMT266 - Family and Child Case Plans Expiring in the Next Month As of...

### Visits

- CMT012 - Parent-Child Visits to Foster Children with a Goal of Reunification Month of X, Best Practices # VII.3
- CMT165 - Social Worker Visits to Children in Foster Care
- CMT166 - Monthly Visits to Children in in-home settings - Best Practices # III.3

Steps Include:

Step 1: Click on the Admin drop down menu.

Step 2: Select the Management Report button.

Step 3: Pick the Report Category.

The screenshot shows the FACES.NET web application interface. The top navigation bar includes tabs for Referral, Case, Client, Provider, and Admin (highlighted). Below the navigation bar is a sidebar with sections: Organizer (Workload, My Assignments, My Workers, My Units, Other Program Areas), My Calendar (showing November 2005), and My Tasks. The main content area is titled 'Management Select Report' and contains a 'Report Search' section. This section has several input fields: 'Report Category' (with a dropdown arrow), 'Report Title', 'Report Number', 'Paper Size', 'Page Orientation', and 'Report Run Dates' (with a dropdown arrow). Arrows point to the 'Report Category', 'Report Title', 'Report Number', and 'Report Run Dates' fields. At the bottom of the 'Report Search' section are three buttons: 'View', 'Report Titles', and 'Cancel'.

Figure 5.24

Step 4: Pick the Report Title.

Step 5: Pick the Report Run Date.

Step 6: Click View.



Notes:

- You may choose the report by the report number;
- Click Report Titles to see a list of all available reports.

## File Cabinet

There is also a file cabinet that stores reports that are not to be amended. For example, transfer summaries are automatically stored in this file cabinet upon approval.

### Legend

The Open command button opens the document that is highlighted.

The Import command button imports documents from your hard drive.

The Details command button shows who imported the document and when.

The Plus Signs on the left expand the topic. The minus signs on the left condense the topic.

### Steps Include:

- Step 1: Place the cursor over the Admin menu, then File Cabinet, and click File Cabinet.
- Step 2: File Cabinet is setup in a tree formatted layout. Click on the plus signs to the left of the folders to navigate to a particular document.

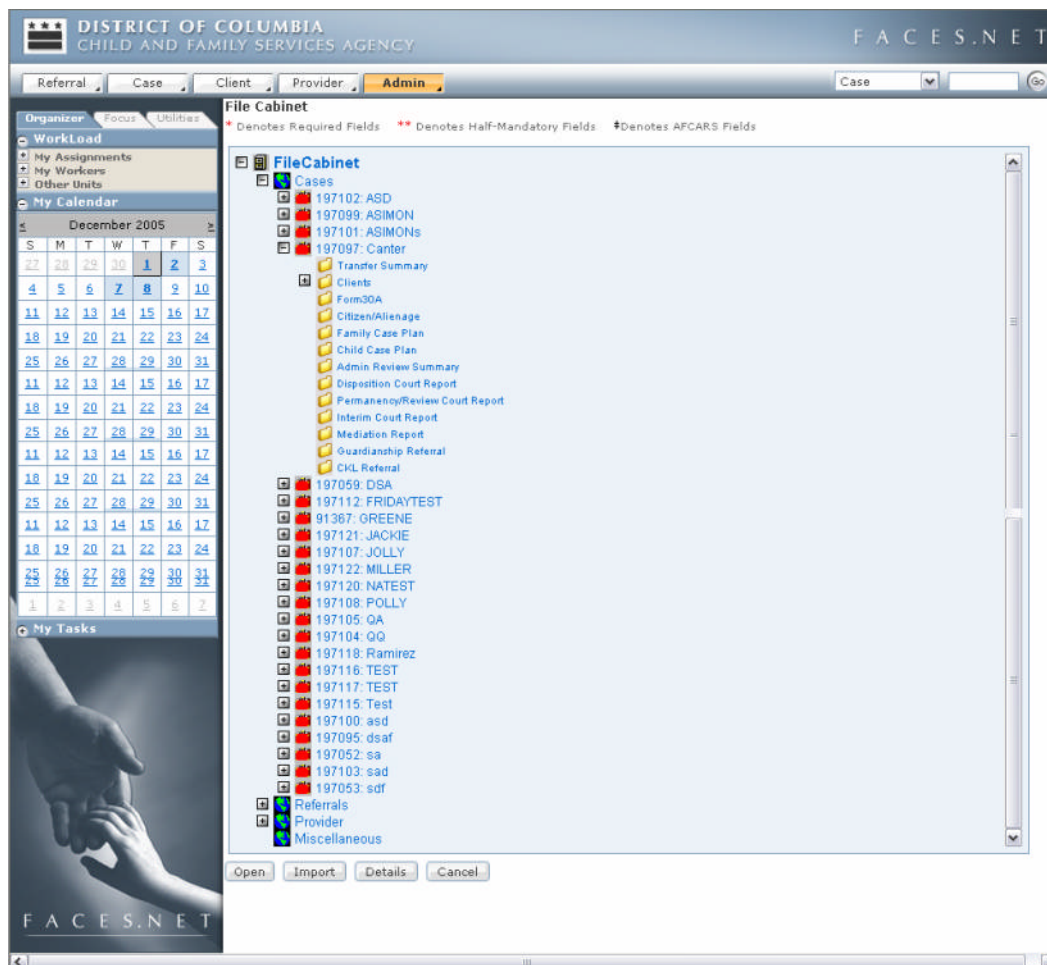


Figure 5.25

- Step 3: Highlight the document and click Open.

# Notes

(This Page Intentionally Left Blank)

## SECTION 6: APPENDIX



(This Page Intentionally Left Blank)



## Glossary of Terms

This Glossary of Terms contains basic information pertaining to the laws, regulations and practice principles which guide the operation of the Child and Family Services Agency (CFSA) of the District of Columbia.

The primary sources for materials in the Glossary are:

1. D.C. and federal law and regulation including definitions in use in the Adoption and Foster Care Analysis and Reporting System (AFCARS);
2. Program Instruction ACYF-PI-CB-96-01 entitled Amendments; Public Law 103-432;
3. Definitions established under the federal National Child Abuse and Neglect Data System (NCANDS);
4. CFSA staff experienced in child welfare practice; and
5. The LaShawn Revised Implementation Plan, August 1, 1994.

Abandoned Child: A child who is neglected in that:

1. the child is a foundling whose parents have made no effort to maintain a parental relationship with the child and reasonable efforts have been made to identify the child and to locate the parents for a period of at least 4 weeks since the child was found;
2. the child's parent gave a false identity at the time of the child's birth, since then has made no effort to maintain a parental relationship with the child and reasonable efforts have been made to locate the parent for a period of at least 4 weeks since his or her disappearance;
3. the child's parent, guardian or custodian is known but has abandoned the child in that he or she has made no reasonable effort to maintain a parental relationship with the child for a period of at least 4 months; or
4. the child has resided in a D.C. hospital for at least 10 calendar days following birth of the child, despite a medical determination that the child was ready for discharge from the hospital, and the parent, guardian or custodian of the child did not undertake any action or make any effort to maintain a parental, guardianship, or custodial relationship or contact with the child. (D.C. Code § 16-2316(d)).

Abandonment: when a child is left alone or with others and the child's caretaker did not return or make his or her whereabouts known. (AFCARS, 45 CFR § 1355 App. A).

Abuse: When a parent, guardian or custodian inflicts or fails to make reasonable efforts to prevent the infliction of physical or mental injury upon a child, including excessive corporal punishment, an act of sexual abuse, molestation or exploitation, or an injury that results

from exposure to drug-related activity in the child's home environment. (D.C. Code § 16-2301 (23)).

Active: Status of a case in which an investigation is being conducted or services are being provided by Child and Family Services Agency (CFSA) and/or a contractual agency. See also, open

Adjudication: See fact-finding hearing.

Administrative Review: One of two types of periodic review that meet federal requirements pertaining to cases of children in foster care. The system of case reviews established by P.L. 96- 272 is intended to: 1) assure that the child has a case plan which meets federal requirements; 2) review the status of the child; and 3) assure that certain procedural safeguards are applied in the case with respect to the legal rights of the child and the parents. Federal law requires that an administrative review be open to the participation of the parents of the child and conducted by a panel of appropriate persons at least one of whom is not responsible for the case management of, or the delivery of services to, either the child or the parents who are the subject of the review. See also, periodic review and P.L. 96-272. (P.L. 96-272, the "Adoption Assistance and Child Welfare Act of 1980" section 475(5)(B)).

Adoption: The method provided by State law which establishes the legal relationship of parent and child between persons who are not so related by birth, with the same mutual rights and obligations that exist between children and their birth parents. This relationship can only be termed "adoption" after the legal process is complete. (AFCARS, 45 CFR § 1355 App. A).

Adoption Assistance: a program established by Title IV-E of the Social Security Act ("Title IV-E") and which provides resources for the placement of children, with special needs, in adoptive homes.

Adoption Assistance Agreement: a written document which states the understanding between a child's adoptive parents and CFSA regarding the funding that will be paid to the adopters to meet the child's special needs.

Adoption Decree: Under D.C. law, a final or interlocutory (interim) decree granted when the Court finds that the prospective adoptee is suitable for adoption, the adoptive parent(s) can provide for the adoptee and that the adoption will be in the best interests of the prospective adoptee. A final decree may not be granted until the prospective adoptee has lived with the prospective adoptive parent for at least 6 months. (D.C. Code § 16-309).

Adoption Finalization: The finalizing of the adoption process with the final adoption court decree.

Adoption Plan: The plan for recruiting and matching an adoptive family with the child to be adopted.

Adoption Services: Services or activities provided to assist in bringing about the adoption of a child. (AFCARS, 45 CFR § 1355 App. A).

**Adoption Social Worker:** Social worker who provides for the services needs of the adoptee and the adoptive family to assist in bringing about the adoption of a child. The adoption social worker is the case manager following placement.

**Adoption Subsidy:** Payments made on a short- or long- term basis pursuant to an agreement between D.C. and an adoptive family concluded prior to an adoption. The payments are made on behalf of a child with special needs when it appears that adoption could not take place without financial aid. Eligibility for a subsidy pertains to the child and continues until the child reaches 18 years of age, with reviews of continuing need annually. Subsidized adoptions may be funded under Title IV-E of the Social Security Act, by D.C. or through other public or private resources. (D.C. Code § 3-115) .See also, special needs.

**Adoptive Home (Pre-finalization):** The District of Columbia, in its regulations, includes families waiting to adopt when it defines an adoptive family as "a household, which has been approved by a child-placing agency to accept a child for adoption, which may be awaiting placement of a child or may have a child in the home" (29 DCMR § 1645.1). Federal law, on the other hand, distinguishes families waiting to adopt from those who have adopted a child by defining the former as "pre-adoptive" homes and the latter as "adoptive" homes (AFCARS, 45 CFR 1355, Apps. A and B) .See Pre-Adoptive Home.

**Adoptive Home:** A home in which a child is living following finalization of Court adoption proceedings which make the child legally a member of the family residing in the household. The family may or may not be receiving an adoption subsidy on behalf of the child.

**Adoptive Parent:** A person with the legal relation of parent to a child not related by birth, with the same mutual rights and obligations that exist between children and their birth parents. (AFCARS, 45 CFR § 1355 App. A) .In Defining "adoptive parent", D.C. regulations include not only an individual "who has adopted a child", but also "a single or married person with whom a child has been placed for adoption" (29 DCMR 1645.1). Under D.C. law, "the term 'adoptive family' includes single persons". (D.C. Code § 3-115).

**AFCARS:** The Adoption and Foster Care -Analysis and Reporting System established under a federal mandate to provide for effective tracking, managing and reporting of information pertaining to children and families served by public foster care and adoption agencies in the United States. (In general, 45 CFR §§ 1355.40, 1355.53 and 1355 App. A-E).

**AFCARS ID:** This is the Record Number field value used in the AFCARS data submission or the value which would be assigned.

**AFDC Relatedness:** With the passage of TANF, the Title IV-E financial eligibility criteria was established as the former Aid to Families with Dependent Children (AFDC) financial eligibility criteria in place as of 7/14/96.

**Affidavit of paternity:** a document where a birth mother identifies who the birth father of the named child is, their last contact with the birth father and his last known whereabouts. This form needs to be notarized.

**Aftercare:** A brief (typically, 90 days) period of time immediately following a child's return to his or her own home from out-of-home care during which services are provided to the child and family to promote reintegration.

**Agency:** District of Columbia, Child and Family Services Agency.

**Aid to Families with Dependent Children (AFDC):** A program, also known as welfare, established under Title IV-A of the Social Security Act to provide financial support for poor children and their families. An individual who cares for a closely related child who is conditionally released from shelter care, committed to the Agency, or in the home as the result of a third-party placement may apply to the Income Maintenance Administration (IMA) to receive AFDC benefits and Medical Assistance (MA) for the child. AFDC and MA benefits may continue after the relative has assumed guardianship of the child.

**Alcohol:** Alcohol is the most commonly used and widely abused drug in the country. It is found in beers, wines and hard liquors.

**Allegation:** See report.

**Alleged Victim:** A child about whom a report regarding maltreatment has been made to a CPS agency.

**American Indian or Alaska Native:** Having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

**Annual Goal:** Statement describing the anticipated growth of a student's skill and knowledge written into a student's yearly Individualized Education Program.

**Anonymous Report Source:** An individual who reports a suspected incident of child maltreatment without identifying himself or herself.

**Annual Review:** A meeting held at least once a year to look at, talk about, and study a student's Individualized Education Program (IEP). The purpose of the review is to make decisions about changes in the IEP, review the placement, and develop a new IEP for the year ahead.

**Applicant:** The person applying for a criminal records check or a person seeking application as a foster parent with the Child and Family Services Agency.

**ARP:** Adoption Resource Program.

**Asian:** Having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian sub-continent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**Assessment:** Review of the facts by workers and social workers to determine the appropriateness of a foster parent or foster home.

Assessment/Investigation: A process by which CFSA is to gather sufficient information to determine the following:

1. if child maltreatment occurred;
2. if there is a risk of future maltreatment and the level of that risk;
3. if the child is safe in the home, and if not, what interventions will ensure the child's protection and maintain the family unit if at all possible; and
4. if continuing agency or community services are needed to reduce the risk of maltreatment occurring in the future.

Assistive Technology: Any item, piece of equipment, or product system that is used to increase, maintain, or improve the functional capabilities of children with disabilities; e.g., augmentative communication boards, computer input devices, special switches.

At-Risk: Condition whereby a child is, by virtue of his or her vulnerability, in danger or jeopardy of abuse or neglect.

Background Conference: a meeting where all parties involved with the child(ren) are invited to share information collectively. This conference is for the benefit of all parties to ensure that everyone is working from the same framework. This information is shared to assist the foster parent(s)/pre-adoptive parents in making an informed decision to adopt the child(ren).

Backlog: See [Intake Backlog](#).

Basic Services: the level of out-of-home care provided to children who need routine attention, require the professional intervention no more than once a week, and have a good prognosis for adaptive functioning. A child in this care level does not need intensive supervision or technical skills from his/her caregiver. Further, these children have no major mental health/emotional problems or medical needs.

Behavior Problem-Child: Behavior in the school or community that adversely affects socialization, learning, growth, and moral development. May include adjudicated or non-adjudicated behavior problems. Includes running away from home or a placement.

Biological Parent: The birth mother or father of the child rather than the adoptive or foster parent or the stepparent.

Black or African-American: Having origins in any of the black racial groups of Africa.

Birth Parents: The natural parent of the child(ren).

Board and Child Care Rate: is a rate paid for the care required by a child who is placed in foster care from a neglecting and/or abusing family. The board rate is based on the service needs of the child; therefore, the general policy is that a foster parent will be expected to provide transportation for medical or therapeutic appointments up to one per week within a normal board rate. There are four categories of board rates as follows:

1. Normal Rate
2. Special Board Rate
3. Handicapped Board Rate
4. Multiple-Handicapped Rate

Boarder Baby: Under D.C. law, a child who has resided in a hospital in D.C. for at least 10 calendar days following the birth of the child, despite a medical determination that the child is ready for discharge from the hospital, and the parent, guardian or custodian of the child has not taken any action or made any effort to maintain a parental, guardianship or custodial relationship or contact with the child. (D.C. Code § 16-2301 (9) (G)).

Business Day: Monday through Friday, excluding legal holidays.

Caretaker: Under D.C. law, an adult person in whose care a minor has been entrusted by written authorization of the child's parent, guardian or legal custodian. (D.C. Code § 16-2301 (27)).

Case: A documented instance of Agency activity or series of activities undertaken on behalf of a parent, family or individual child occurring in response to a report of abuse or neglect, a relinquishment or a request for voluntary care. Agency activities undertaken on behalf of a parent or family may include an investigation (generally at intake), family preservation services, child protective services, foster care services or adoption services. Agency activities undertaken on behalf of an individual child may include foster care services or adoption services. See also, child's case and family case.

Caseload: The total number of family and/or child cases serviced by a social worker.

Case Management: Case Management is the coordination of the multiplicity of services required by a child abuse and neglect client. Some of these services may be purchased from an agency other than the mandated agency. In general, the role of the case manager is not primarily the provision of direct services but the monitoring of those services to assure that they are relevant to the client, delivered in a useful way, and appropriately used by the client. To do this, a case manager assumes the following responsibilities:

1. ascertains that all mandated reports have been properly filed;
2. informs all professionals involved with the family that reports of suspected child abuse or neglect have been made;
3. keeps all involved social workers apprised of new information;
4. calls and chairs the initial and ongoing case conferences for assessment, disposition and treatment plans;

5. coordinates interagency follow-up; and
6. calls further case conferences as needed.

Case Management Services: Services or activities for the arrangement, coordination and monitoring of services to meet the needs of children and their families. (AFCARS, 45 CFR § 1355 App. A).

Case Plan: A written document that serves to guide the provision of services to a family and/or to a specific child. The case plan, developed with members of the family and/or the child, clearly identifies goals and objectives to be achieved and spells out tasks to be performed by the worker, adult family members and/or child. Time frames for completion of tasks must be included in a case plan, which is signed by those directly involved as well as by a CFSA or Consortium agency supervisor responsible for approving the plan. For the case plan of a child in foster care, P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" requires at least:

1. a description of the type of home or institution in which the child is, or will be, placed;
2. a discussion of the appropriateness of the child's placement;
3. a discussion of how the Agency plans to carry out the court's determination that continuation in the home would be contrary to the child's welfare and that, where not precluded, reasonable efforts have been made to prevent removal of the child from the home and/or to facilitate the return of the child to the home;
4. a plan for assuring that the child receives proper care and that services are provided to the parents, child and foster parents in order to improve the conditions in the parents' home, facilitate the return of the child to his own home or to a permanent placement and for addressing the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided to the child under the plan.

P.L. 96-272 also requires that each foster child's case plan be "designed to achieve placement in the least restrictive (most family like) and most appropriate setting available and in close proximity to the parents' home consistent with the best interest: and special needs of the child." Furthermore, the case plan of any child placed in a foster family home or child-care institution a substantial distance from the home of the parents, or in a different State, must "set forth the reasons why the placement is in the best interests of the child".

In addition to addressing the issue of distance from the home of the parents in the child's case plan, when a child is placed outside of the State in which the child's parents are located, an Agency social worker or a social worker from the State where the child is placed must visit at least every 12 months. A report on the visit must be submitted to the State agency where the parents reside. (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(1) and (5) (A)).

Case Record: The physical folder in which case information is maintained and electronic data pertaining to individuals in reference to the case, including information in the Child Protection Register (CPR). D.C. regulations pertaining to child- placing agencies define "record" as "the individual file(s) kept by an agency concerning a child who has been accepted for care or adoptive placement, the child's family, adoptive applicant or family, foster family and agency employees" (29 DCMR 1645.1).

CFSA: District of Columbia, Child and Family Services Agency.

CFSA Temporary Hold: a means of placing a child in the temporary custody of CFSA when a child has been left alone or with inadequate supervision, this is the means by which a social worker may place the child in the temporary care of CFSA. A neglect petition must be filed within five (5) days, if the parent has not claimed the child. The social worker is to notify the Office of the Attorney General immediately upon placing this child in this temporary hold status, so that the process of drafting the petition can begin.

Change in Placement: Any change in the placement of a child who is in the legal/physical custody of the Child and Family Services Agency is considered to be a formal change in placement. This term refers specifically to situations in which the child's removal from the home is not immediately necessary. Such placements should occur, whenever possible, with the involvement of the parent, as a part of the overall service agreement and case planning process for the family. A change of placement should be made only after a home evaluation and assessment of the potential kinship caregiver has been completed.

Child: The D.C. statute pertaining to children who come before the court defines "child" as a person under 18 years of age except for the purposes of criminal justice cases in which those 16 or over are charged with certain crimes and/or offenses). (D.C. Code § 16-2301(3)). The federal AFCARS definition of the term "child" includes both a person under 18 years of age and also a person under 21 years of age considered under State law to be a minor (AFCARS, 45 CFR § 1355 App. A) .A minor under applicable D.C. law is a person 21 years of age or younger. See also, minor.

Child Abuse and Neglect Prevention Children's Trust Fund: A prevention program in the District of Columbia, including a community-based program, that focuses on child abuse and neglect, public awareness and issues including prenatal care, parental bonding, child development, basic child care, care of children with special needs or coping with family stress.

Under this program, child abuse is defined as "harm or threatened harm to a child's health or welfare by a person responsible for the child's health or welfare, which occurs through the intentional infliction of physical or emotional injury or an act of sexual abuse which includes a violation of any provision of the Prevention of Child Abuse and Neglect Act of 1977 (D.C. Law 2-22) ". Child neglect is defined as "harm to a child's health or welfare, which occurs through the failure to provide adequate food, clothing, shelter, education, or medical care".

The Child Abuse and Neglect Prevention Children's Trust Fund program provides counseling, support groups and early identification services for at-risk parents and children and supports prevention programs in the D.C. public schools. (D.C. Code § 6-2131).

Child Age At Report: Age, calculated in years, as of the date of the report of alleged maltreatment.

Child Custodian: means a person or agency, other than a parent or legal guardian, to whom the legal custody of a child has been granted by the order of a court or who is acting loco parentis.

**Child Date of Birth:** The month, day and year of the child's birth.

**Child Daycare Provider:** A person with a temporary caregiver responsibility for the child who is not related to the child, such as a daycare center staff member, a family daycare provider, or a baby-sitter. Does not include persons with legal custody or guardianship of the child.

**Child Demographics:** Statistical characteristics of the child, such as age and race.

**Child Ethnicity:** See Hispanic or Latino.

**Child Fatality Review:** A formal review by an interdisciplinary, interagency committee of any child fatality known to CFSA with the past ten years.

**Child File:** The data file submitted to NCANDS on a periodic basis that contains detailed case data about children who are the subject of an investigation or assessment.

**Child ID:** See Child Identifier.

**Child Identifier:** A unique identification assigned to each child. This identification is not the State child identification but is an encrypted identification assigned by the State for the purposes of the NCANDS data collection.

**Child Maltreatment:** Harm or risk of harm to a child's physical or mental health or welfare. As defined, provides a basis for State intervention on behalf of the child.

**Child-Placing Agency:** Under D.C. law, any person, firm, corporation, association, or public agency that receives or accepts children under 16 years of age and places or offers to place them for temporary or permanent care in a family home other than that of a relative within the third degree of kinship. (29 DCMR 1645.1)

**Child Protection Register (CPR):** A confidential index of case information concerning reports of abused and neglected children maintained by the Agency. (D.C. Code § 6-2111).

**Child Protection Register Clearance:** Means obtaining a clearance from the Agency's Child Protection Register, which is a confidential index of case information concerning reports/referrals of, abused and neglected children. The Child Protection Register is maintained by the Intake Administration, and clearances can only be obtained by submitting a request from an agency employee who is authorized to obtain such information.

**Child Protective Services (CPS):** An official agency of a State having the responsibility for child protective services and activities.

**Child Protective Services (CPS) Supervisor:** The supervisor of the social worker assigned to a report of child maltreatment at the time of the report disposition.

**Child Protective Services (CPS) Worker:** The worker assigned to a report of child maltreatment at the time of the report disposition.

**Child Protective Services (CPS) Workforce:** The CPS supervisors and workers assigned to handle a child maltreatment report. May include other administrative staff as defined by the State Agency table of organization.

**Child Record:** A case-level record in the Child File containing the data associated with one child in one given report.

**Child Risk Factor:** A child's characteristic, disability, problem, or environment, which would tend to increase the risk of his becoming a maltreatment victim.

**Child Sex:** The gender of the child.

**Child-Specific Recruitment:** is the practice of finding a foster or adoptive family for a particular child, as opposed to recruiting families in general and later matching the family and child. This approach focuses on individual waiting children, both to attract specific families as placement resources, and to provide more detailed and specific insights about the types of children needing placement.

**Child Victim:** A child for whom an incident of abuse or neglect has been substantiated or indicated by an investigation or assessment. A State may include children with alternative dispositions as victims.

**Client:** A person requesting or receiving services.

**Closed:** Status of a case when:

1. an investigation or delivery of services has been completed;
2. CFSA and/or a contractual agency have terminated contact with a client or family; and
3. appropriate closing paperwork has been prepared and processed.

**Cocaine:** Cocaine is a white powder that is derived from the south American coca plant Crack is a chemically altered smokeable form of cocaine in the form of pellets or crystalline rocks.

**Collaboratives:** The Collaboratives in the District of Columbia are comprised of non-profit service providers, schools, faith communities, civic and resident associations, community leaders and neighborhood residents. These individuals and organizations have come together in each neighborhood to form a coordinated network of services and supports for children and families. CFSA staff work in partnership with the Collaboratives and other community partners to provide a wide range of community-based services designed to insure the safety of children and their families to include short-term and long-term case management. The CFSA Ferebee Hope Community Service Center and the Collaboratives

offer an array of supportive services to children and their families within their own communities. Such services can include mentoring, tutoring, educational/job training, housing assistance, advocacy and legal assistance and emergency funds.

**Commitment:** is a legal status based on a court order following an adjudication of neglect, which places a child into the ongoing custody of CFSA. The commitment orders are for a term not to exceed two (2) years.

**Committed Child:** A child adjudicated neglected and placed by, the Court in the legal custody or under the guardianship of the Agency. Under D.C. law, a child who is adjudicated neglected may be either an abused and/or a neglected child.

**Community-Based Group Homes:** are facilities that house up to (8) children or youth in a community setting. They offer the full range of community resource, including employment, health care, educational, and recreational opportunities. They are staffed on a rotating shift basis by live-in house persons, a teaching family, or some combination of the two. No child under age twelve (12) shall be placed in a group care setting, unless the child has special treatment needs that cannot be met in a home-like setting and the selected group home has a program to treat the child's specific needs. Adolescent mothers are an example of this category.

**Community-Based Services:** An approach to service delivery which seeks to create partnerships among public and private child and family serving agencies, clients, neighborhood groups and local institutions for the provision of culturally appropriate services within communities.

**Complaint:** See report.

**Concurrent Case:** A process that promotes the child's health and safety by developing family reunification plans and assessing the availability of extended family resources while simultaneously assessing and facilitating the identification of the family who will commit to the child's legal permanency.

**Conditional Release:** Court-ordered diversion or release of a child from shelter care pending a fact finding or dispositional hearing when a judge determines that the child may be adequately safeguarded by placement with a parent, relative or other person or agency able to provide supervision or care for the child. The judge may impose upon the placement whatever conditions he or she considers necessary to protect the child from harm and to ensure the child's appearance at the fact-finding hearing. (D.C. Code § 16-2312 (d)).

**Confidential Information:** Information acquired by a CFSA or contract agency staff member pertaining to a child reported or found to be abused or neglected, the child's family or other individuals associated with the case. Confidential information may be disclosed only for purposes relating to investigating abuse or neglect or obtaining services for the child or family (D.C. Code § 6-2126). Unauthorized disclosure of confidential information is a misdemeanor with a fine not to exceed \$1000. (D.C. Code § 6-2127).

Consent to Adoption: A written statement agreeing to a proposed adoption of a child. A consent to the specific adoption of the child must be filed along with an adoption petition unless a judge has determined that consent has been withheld contrary to the best interest of the child. To be valid, such a consent must be signed and acknowledged in the presence of:

1. a person authorized by law to accept acknowledgements, for example, a notary public;
2. a representative of a child-placing agency, for example, a CFSA social worker; or
3. The Mayor.

A consent to adoption must be voluntarily given and can only be rescinded or revoked if it can be shown that the consent was improperly obtained, or involuntary.

Consent to an adoption of a child must be obtained from:

The child, if the child is 14 years of age or older; and

1. both parents, if they are both alive, or the living parent if one is dead; or
2. the court-appointed guardian of the child; or
3. a licensed child-placing agency or the Mayor when there has been termination of parental rights (TPR) or a relinquishment to the agency or the Mayor; or
4. the Mayor in all other situations.

A minor parent may consent to the adoption of his or her child. Consent is not required from a parent who, after notice, cannot be located or one who has abandoned the child and voluntarily failed to contribute to the child's support for a period of at least six months prior to the filing of the adoption petition. (D.C. Code § 16-304) .

Contact: Any type of communication that comes through the Hotline. The types of communication is as follows:

1. Report or Compliant-document call and refer for Intake assessment/investigation.
2. Information and Referral-document call and refer to a community resource for services.
3. Receive Services-Caller is inquiring about a service and not a complaint or report-document call and refer to appropriate service.
4. Provider of Services Request-Caller wants to provide a service to agency-document name, telephone number, and type of services to be provided for persons wanting to provide services and refer to the appropriate resource component in CFSA for further assessment.
5. Out of Town Inquiries(OTI)-Caller wants assessment or monitoring of out of state children who are not in CFSA care-document receipt of request and send to appropriate CFSA service unit for assignment.
6. Interstate Compact- Caller wants Interstate Compact service provided by CFSA-document the call and forwarded to CFSA Interstate Coordinator.
7. Court Social Services-Caller is referring a Court Social Service case for placement services in CFSA-document call, create or re-open case, receive packet of information,

request placement and forward to the appropriate CFSA service unit for assignment when related to reporting or investigating alleged child abuse or neglect, a child means a person under 18 years of age.

Conviction: Means a plea or verdict of guilty or plea of noto contendere.

Counseling Services: Services or activities that apply therapeutic processes to personal, family, situational or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances. (NCANDS) .

Court: Family Division of the District of Columbia Superior Court.

Court-Appointed Representative: A person appointed by the court to represent or advocate for a child in a neglect or abuse proceeding. May be an attorney or a Court-appointed Special Advocate (or both) and is often referred to as a Guardian ad Litem. Makes recommendations to the court concerning the best interests of the child.

Court Review: One of two types of periodic review that meet federal requirements pertaining to cases of children in foster care. The system of case reviews established by P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" is intended to: 1) assure that the child has a case plan which meets federal requirements; 2) review the status of the child; and 3) assure that certain procedural safeguards are applied in the case with respect to the legal rights of the child and the parents. P.L. 96-272 requires that a dispositional hearing be held to determine the future status of each foster child within 18 months of placement. Amendments to the Social Security Act passed in 1994 specify that a review or "subsequent dispositional hearing" be held "not less frequently than every 12 months". (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" section 475(5) (C)) .In D.C., the case of any committed child under the age of 6 or not committed longer than 2 years must, by law, be reviewed every 6 months. The cases of all other children under the Court's jurisdiction must be reviewed at least every year. (D.C. Code §§ 16-2323) .See also, dispositional hearing, periodic review and P.L. 96-272. (P.L. 96-272, the "Adoption Assistance and Child Welfare Act of 1980" section 475(5) (C)) .

Criminal Records Check: A search of criminal records (local MPD and federal FBI) to determine whether an individual has a criminal conviction. The Federal Bureau of Investigation, the Metropolitan Police Department, or the state's law enforcement agency if the individual resides outside of the District of Columbia performs the search.

Criminal Records Check Offense: Means a conviction of one of the following offenses by the kinship caregiver applicant and any adult age 18 or older residing in the caregiver's home.

1. Child Abuse;
2. Child Neglect;
3. Spousal Abuse;
4. A crime against children, including child pornography; or
5. A crime involving violence, including, but not limited to,

6. Rape, sexual assault, homicide, assault or battery.

This definition also pertains to an individual who has a felony conviction for any of the following offenses or their equivalents committed within the past 5 years:

1. Fraud; or
2. A drug-related offense.

**Custodian:** Under D.C. law, a person or agency, other than a parent or legal guardian, to whom the legal custody of a child has been granted by the order of a court, who is acting in loco parentis (in place of a parent) , or who is a day care provider or an employee of a residential facility, in the case of the placement of an abused or neglected child. (D.C. Code § 16-2301 (12) .

**Custody:** A legal status pertaining to the day-to-day, ordinary care of a child. See also, legal custody.

**D.C. Kids:** The integrated health care system operated by CFSA to provide medical services to foster children.

**Daycare Services:** Activities provided to a child or children in a setting that meets applicable standards of State and local law, in a center or in a home, for a portion of a 24-hour day.

**Denial of paternity:** a document where the alleged (putative) birth father, denies that he is the birth father of the named child. This form needs to be notarized.

**Diligent Search:** a search done by investigators to locate a person. This is done at the Agency primarily to locate a birth mother and/or father to progress with the goal of adoption and to ascertain there intentions with regards to there child(ren).

**Disability:** Physical or mental impairment that may decrease a person's ability to do certain actions.

**Disposition:** A finding based upon credible evidence gathered in an investigation that a child reported to be abused or neglected is or has been an abused or neglected child.

**Dispositional Hearing:** In D.C. law, a hearing, after a finding of fact, in which the Court determines what disposition should be made in the case of an abused or neglected child (D.C. Code § 16-2301 (17)) .A predisposition study and report is furnished to the Court by the Agency or Court Social Services addressing the following issues:

1. harm that has occurred to the child and how it will be alleviated;

2. plans and timeframes for intervention, parental activities and specific services recommended, as well as criteria for determining when intervention may no longer be needed; and
3. when it is recommended that the child be removed from his or her home, the reasons that the child cannot be protected in the home, the type of placement that is recommended, the steps that will be taken to address any identified harm that is likely to occur to the child as a result of removal and plans for visitation, consistent with the child's well-being. (D.C. Code § 16-2319)

A dispositional order vesting legal custody of an abused or neglected child in a department, agency or institution or in an individual other than a parent is limited in duration to 2 years; however, such an order may be extended for additional periods of one year when a judge determines that it is necessary to do so in order to safeguard the well-being of the child or to protect the child's interest. (D.C. Code § 16-2322) .

Federal law currently requires that when a child is placed out-of-state, the initial and all subsequent dispositional (review) hearings specifically address the issue of whether an out-of-state placement is, at the time of the hearing, appropriate and in the best interests of the child. (P.L. 96-272, section 475(5)) .

Under federal law, when a child is in foster care, a dispositional hearing to address the future status of the child must be held within 18 months of the original foster care placement and not less frequently than every 12 months thereafter except when the child is residing with a specific caregiver in a permanent foster care placement. (P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(5) (C)) .

**Domestic Violence:** Incidents of inter-spousal physical or emotional abuse perpetrated by one of the spouses or parent figures upon the other spouse or parent figure in the child's home environment.

**Due Process Hearing:** A formal session conducted by an impartial hearing officer to resolve special education disagreements between parents and school systems.

**Early Intervention:** Providing services and programs to infants and toddlers (under age three) with disabilities in order to minimize or eliminate the disability as they mature.

**Ecstasy:** Ecstasy is derived from speed and Methamphetamine. It can be found in capsule, tablet, powder or liquid forms.

**Educational Advocate:** An individual who speaks or acts knowledgeably for the educational needs of another.

**Educational Diagnostician:** A professional who is certified to conduct educational assessments and to design instructional programs for students.

**Education and Training Services:** Activities provided to improve knowledge of daily living skills and to enhance cultural opportunities.

**Emergency Care:** a short-term, urgent need for an initial placement in, or a replacement from, one family home, group home, or other facility to another. Emergency care is designed to be for thirty (30) days or less and to allow the social worker an opportunity to assess a child's newly identified needs as well as the propriety of continued placement.

**Emergency Care Foster Homes:** a short term, urgent need for an initial placement in, or a replacement from, one family home, group home or other facility to another. Emergency care is designed to be for thirty (30) days or less and to allow the social worker an opportunity to assess a child's newly-identified needs as well as the propriety of continued placement.

**Emergency Placement:** A placement precipitated by an imminent danger to the child (ren) or by abandonment. The placement may only be made after appropriate Child Protection Register and criminal background checks have been obtained for the potential relative/kinship caregiver; and, the worker has completed an on site interview and home assessment all of which must meet agency requirements for approval. The placement may be made prior to the completion of the full caregiver assessment and home evaluation, provided the conclusion of a preliminary assessment meets required safety standards. Emergency placements are designed to be for a period of thirty (30) days or less, this is to allow the social worker time to assess the child as well as to determine the needs of the triad (child, birth parent(s), and kinship caregiver) while determining the appropriateness of continued out-of-home placement. The decision to make any emergency placement must be made by the worker in conjunction with consultation and approval from his or her supervisor.

**Emotionally Disturbed:** A clinically diagnosed condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree: an inability to build or maintain satisfactory interpersonal relationships; inappropriate types of behavior or feelings under normal circumstances; a general pervasive mood of unhappiness or depression; or a tendency to develop physical symptoms or fears associated with personal problems. The diagnosis is based on the Diagnostic and Statistical Manual of Mental Disorders (the most recent edition of DSM). The term includes schizophrenia and autism.

**Employment Services:** Activities provided to assist individuals in securing employment or the acquiring of skills that promote opportunities for employment.

**Ethnicity:** See Hispanic or Latino.

**Expungement:** The process by which the Agency erases all identifying information in a report from the Child Protection Register (CPR) .Information is expunged either upon the 18th birthday of a child found to have been abused or neglected (unless there is a younger sibling in the home who is known or suspected to be abused or neglected) ; 5 years after services provided to the family as a result of the abuse or neglect have been terminated,

whichever occurs first; or when CPR material is successfully challenged. (D.C. Code § 6-2117) .

**Extended School Year:** Special education provided during summer months to students found to require year-round services to receive an appropriate education.

**FACES.NET:** FACES.NET is a child welfare information system use to collect information about clients and providers. It is also used as a tool to organize that information to enhance CFSA operations and service to families in the community.

**Facility:** a foster home where children reside 24 hours a day. Facilities specifically include those on contract, those in which the court has ordered children placed, those operated by the city or another government entity and those where CFSA has family or child care responsibility.

**Fact-finding Hearing:** A hearing to determine whether the allegations in a neglect petition are true, also known as adjudication, adjudicatory hearing or trial. (D.C. Code 16-2301(16)).

**Families Together:** is a family preservation program that provides intensive three-month home-based services to families, for whom the removal of a child is imminent due to risk of abuse or neglect. This program is operated by CFSA.

**Family:** Means one or more parents and children related by blood, marriage, or adoption residing in the same household; or a parent substitute, such as a related caregiver or legal guardian who has responsibility for the 24-hour care and supervision of a child.

**Family Case:** A documented instance of Agency activity or series of activities undertaken on behalf of a parent or family occurring in response to a report of abuse or neglect or a request for voluntary care. A family case is opened during an investigation and during the delivery of family preservation services, child protective services, foster care services or adoption services.

**Family-Centered Services:** An approach to working with families and children that focuses upon the families rather than upon individuals. Services are based upon an assessment of the entire family and a negotiated family plan designed to strengthen and maintain the family while protecting children and promoting their healthy, positive development.

**Family Counseling:** Under D.C. law, any psychological or psychiatric or other social service offered by a provider to the parent and one or more members of the extended family of a child who has been adjudicated neglected or to the child's guardian or other caretaker. (D.C. Code § 16-2301 (27)).

**Family Planning Services:** Educational, comprehensive medical or social services or activities which enable individuals, including minors, to determine freely the number and spacing of their children and to select the means by which this may be achieved. (NCANDS)

**Family Preservation Services:** Typically, strengths-based interventions designed to help families alleviate crises that might lead to out of home placement of children, maintain the safety of children in their own homes, support families reunifying or adopting, and assist families in obtaining skills, services, including respite care, and other supports necessary to address their multiple needs in a culturally sensitive manner. Family preservation services are not appropriate when a child cannot be protected from harm without placement or when a family has insufficient strengths upon which to build. (Title IV-B, Social Security Act, Subpart 2 and NCANDS) .

**Family Responsibility:** The duty of the CFSA worker assigned to the family case to provide coordination when two or more CFSA and/or Consortium agency social workers are providing services to members of a family.

**Family Services:** The general term use to refer to those CFSA intervention services that are offered to stabilize intact birth, foster, or adoptive families.

**Family Support Services:** Primarily community-based preventative activities designed to increase the strength and stability of families, alleviate stress and promote parental competencies and behaviors that will increase the ability of families to successfully nurture their children. Family support services are available to all families to facilitate use of resources and opportunities available in the community, promote healthy child development and create supportive networks to enhance child-rearing abilities of parents and help compensate for the increased social isolation and vulnerability of families" (Title IV-B, Social Security Act, Subpart 2 and NCANDS) .Family support services should be offered in a manner which is sensitive to the culture of the individuals served.

**Fatality:** See Maltreatment Death

**Fatality Review:** Formal review by an interdisciplinary, interagency committee of cases in which child abuse or neglect may have caused or be related to the death of a child.

**Final Decree:** establishes the legal parent-child relationship between the adopters and the child. This legal relationship assures that there are mutual rights of inheritance and succession, as if the child had been born to the adopters.

**Final Report:** This report includes a follow up of all recommendations from the internal and citywide Child Fatality Review Team meeting, and in these instances the required follow up shall be reported as an addendum to the initial report by the social worker. This information should be completed in accordance with the time frame set up by the CFSA Internal CFRT Coordinator, between one (1) to three (3) months. The supervisor will insure that two (2) copies of the final Child Fatality Review report are forwarded to the CFSA Internal Child Fatality Coordinator.

**Financial Problem:** A risk factor related to the family's inability to provide sufficient financial resources to meet minimum needs.

Formal Kinship Care: Refers to situations where the Child and Family Services Agency and/or the Superior Court of the District of Columbia make or are directly involved in the decision to remove a child from his or her parent(s) or other legal guardian and place him or her with a family member.

Foster Care: 24 hour substitute care for all children placed away from their parents or guardians and for whom the Agency has placement and care responsibility. (45 CFR § 1355.20).

The term "foster care" specifically refers to the status of a child who:

1. is in shelter care (pre-trial); or
2. has been committed to the Agency by the court and placed outside his or her own home (Post-trial) ;
3. is under the permanent care and guardianship of the Agency which may consent to the child's adoption following relinquishment of parental rights;
4. is removed from his or her home pursuant to a voluntary placement agreement; or
5. is on conditional release from shelter care or has run away or absconded from care or is at home on a trial basis while in care.

A child is not in foster care:

1. when the child residing at home is not under the jurisdiction of the court and his or her family is receiving family preservation or continuing child protective services;
2. when a judge has ordered protective supervision of the child;
3. when the child is in a third-party placement, whether or not the placement has been ordered by the court; or
4. when a child has been relinquished by his or her parent(s) and is under the jurisdiction of the D.C. Superior Court but is not committed to the Agency.

Foster Care Drift: The languishing of children in foster care due to the lack of permanency planning.

Foster Care Family: is a planned, goal-oriented care of a child in the home of a family, which is licensed to provide 24 our temporary, substitute care by the District's Department of Public Health, or the comparable authority in another jurisdiction. Foster families are

committed, prepared, and trained to provide a welcoming, nurturing, and supportive home for a child who is undergoing the trauma of separation from her/his biological family. Foster families also help maintain bonds between the children and their birth parents. If the family foster home is located in a jurisdiction outside of the District, the child's placement must be approved by the Interstate Compact Office of that jurisdiction.

Foster Family Home (Relative): See relative foster care.

Foster Parent: An individual who is licensed or approved to provide a home for one or more related or non-related children who are orphaned, abused, neglected, delinquent, or disabled.

Foster Care Social Worker: Social worker who provides for the services needs of the child in the foster home and participates in the transitioning of the child to the adoptive home if different from the foster home. The foster care social worker is the case manager prior to placement.

Foster Care Treatment: is the service also known as "specialized" or "therapeutic foster care". It is temporary out-of-home care offered to a child with "special needs", by foster parents who are trained to provide specific treatment and who are both supervised and supported by agency staff as they do so.

Foster Parent Services Unit: The unit within CFSA that has responsibility for reassessing the foster parents on-going ability to continue in the role of a foster parent.

Foster Parent Services Worker: Workers who have responsibility for assessing and reassessing foster parent's ability to continue as a foster parent; and ensure the foster home is in compliance with regulations and guidelines established by the Department of Health.

Free Appropriate Public Education (FAPE): The words used in the federal law, the Individuals with Disabilities Education Act (IDEA), to describe a student's right to a special education program that will meet his or her individual special learning needs, at no cost to the family.

General Assistance for Children (GC): A program under the Income Maintenance Administration (IMA) in the District of Columbia which provides benefits that are the same as those a child would receive under Aid to Families with Dependent Children (AFDC) . Benefits may be provided when a child is residing with a caretaker who is not a close relative of the child as defined in federal AFDC regulations or who cannot prove close relationship. (D.C. Code § 3-205.5a.)

Generic recruitment: involves presenting to the public general information about the needs of waiting children.

Goals: See permanency goals.

Group Homes (Community Based): are facilities that house up to eight (8) children in a community setting. They offer the full range of community resources, including employment, health care, educational, and recreational opportunities. They are staffed on a rotating shift basis by live-in house persons, a teaching family, or some combination of the two. No child under age twelve (12) shall be placed in a group care setting, unless the child has special treatment needs that cannot be met in a home-like setting and the selected group home has a program to treat the child's specific needs.

Guardian Ad Litem (GAL) : An attorney appointed by the Superior Court of the District of Columbia Family Division to represent an abused or neglected child in Court proceedings, including termination of parental rights. It is the responsibility of the guardian ad litem to represent the child's best interests. (D.C. Code §§ 6--2101 (4) and 16-2304 (a).

Guardianship: "Guardianship of the person of a minor" involves concern with the general welfare of the minor and the right to make important decisions in matters having a permanent effect on the minor's life and development. It includes, but is not limited to:

the authority to consent to marriage, enlistment in the armed forces and major medical, surgical or psychiatric treatment;

1. the authority to represent the minor in legal actions and to make decisions of substantive legal significance concerning the minor;
2. the authority and duty of reasonable visitation (except as limited by court order);
3. the rights and responsibilities of legal custody when guardianship of the person is exercised by the child's birth or adoptive parent (except when legal custody has been vested in another person, agency or institution) ; and
4. the authority to exercise residual parental rights and responsibilities when the rights of the child's parents or only living parent have been judicially terminated or when both parents are dead. (D.C. Code § 16-2301 (20)) .

Handicapped Board Rate: is a rate paid for a child who needs foster parent intervention because he/she can not accomplish normal age appropriate life processes i.e.: eating, bathing, toileting, dressing, ambulating, emotional and or social control without adult intervention. Children who require foster parents who have special training to participate in the treatment plan and daily care of the child are classified as handicapped.

A request for the handicapped board rate must be accompanied by a professional diagnosis and a service plan, which will elaborate, on the need and type of required intervention.

Health-Related and Home Health Services: Activities provided to attain and maintain a favorable condition of health.

**Hispanic Or Latino:** A person from Cuba, Mexico, Puerto Rico, South or Central America, or other Spanish language culture, regardless of race.

**Home-Based Services:** In general, services provided to families in their homes, rather than in the Agency or other institutional settings. A narrower standard is found in the federal AFCARS definitions which state that home-based services include "services or activities provided to individuals or families to assist with household or personal care in order to improve or maintain adequate family well-being including homemaker services, chore services, home maintenance services and household management services". (AFCARS,45 CFR § 1355 App. A) .

**Homestudy:** a counseling and assessment process with the primary goal of providing secure nurturing and permanent families for children. The home study involves completion of MAPP training and extensive background checks on the applicants and their household members.

**Household:** A home and all individuals residing within the home.

**Housing Services:** Activities designed to assist individuals or families in locating, obtaining or retaining suitable housing.

**Heroin:** Heroin, a white-to-brownish tar-like substance or powder is a highly addictive drug derived from morphine.

**Impartial Hearing Officer:** Individual presiding over a due process hearing, appointed by the state education agency, and not connected in any way with either party in a dispute.

**Inactive:** Status of an open case in which no services are being provided. An inactive case is most likely to be a family case in which services are not being provided although a related child's case is being actively served. For example, when a foster child has a permanency plan of Independent Living and the child's parent is not receiving any services, the family case is considered to be inactive.

**Inadequate Housing:** A risk factor related to substandard, overcrowded, or unsafe housing conditions, including homelessness.

**Incident Date:** The month, day, and year of the most recent known incident of alleged child maltreatment.

**Independent And Transitional Living Services:** Activities designed to help older youth in foster care or homeless youth make the transition to independent living.

**Indicated Or Reason To Suspect:** An investigation disposition that concludes that maltreatment cannot be substantiated under State law or policy, but there is reason to suspect that the child may have been maltreated or was at risk of maltreatment. This is applicable only to States that distinguish between substantiated and indicated dispositions

**Income Maintenance Administration:** (IMA)- a DHS office, charged with the determination of eligibility under the Medicaid, TANF, and General Public Assistance for Children (GC).

**Individual and Institutional Reports:** If the mandated reporter is a staff member of a hospital, school, agency or similar institution, they must immediately notify the person in charge of the institution or that person's designated agent who shall then be required to make the report. The fact this notification does not relieve the person who was originally required to report of the responsibility to report.

**Individualized Education Program (IEP):** A written plan for each student in special education describing the student's present levels of performance, annual goals including short-term objectives, specific special education and related services, dates for beginning and duration of services, and how the IEP will be evaluated.

**Individualized Family Service Plan (IFSP):** A written statement for each infant or toddler receiving early intervention services that includes goals and outcomes for the child and family. It also includes a plan for making the transition to services for children over age 2.

**Individuals with Disabilities Education Act (IDEA):** The authorizing federal legislation, which mandates a free, appropriate public education for all children with disabilities. Formerly known as the Education for All Handicapped Children Act. Part B one. Part H refers to the early intervention program for infants and toddlers with disabilities from birth through age two and their families.

**Information and Referral Services:** Services or activities designed to provide information about services provided by public and private service providers and a brief assessment of client needs (but not a diagnosis and evaluation) to facilitate an appropriate referral to these community resources. (NCANDS) .

**Inhalants:** Inhalants include, typewriter correction fluid, felt tip markers, spray paint, air freshener, butane and cooking spray (there over 1,000 products).

**Initial Child Fatality Review Summary Report:** This summary includes a discussion of all information available regarding the circumstances of the child's death, a thorough report of the history of and reasons for CFSA involvement with the deceased child and his/her family and a description of service delivery and safety plans for the children remaining in the deceased child's home or foster care placement. The supervisor will ensure that two copies of the Initial Child Fatality Review Summary Report are forwarded to the CFSA Internal Child Fatality Review Team Coordinator.

**Initial Investigation:** A mandated process in which CFSA and/or the police gather, evaluate and act upon information received in a report of alleged child abuse or neglect. The purpose of an investigation is to determine, to the extent possible:

1. The nature, extent, and cause of any reported abuse or neglect;
2. The identify of the person responsible for the abuse or neglect;
3. The name, age, sex and condition of the abused or neglected child and of all other children in the home;
4. The conditions in the some at the time of the investigation;

5. Whether there is any child in the home whose health, safety or welfare is in jeopardy because of his or her treatment in the home or his or her home environment; and
6. Whether any child who is in jeopardy because of treatment in the home or his or her home environment should be removed from the home or can be protected by the provision of resources or services available in the community.

**Institution:** A child care facility operated by a public or private agency which provides 24-hour-care and/or treatment for children who require separation from their own homes and group living experience. These facilities may include: child care institutions, residential treatment facilities, maternity homes, etc. (AFCARS, 45 CFR § 1355 App. A) D.C. law specifies that private institutions are those which provide care and maintenance for neglected and/or dependent children on a contractual basis with the City (D.C. Code § 3-203.1(3) ) .D.C. children may be placed in child care institutions outside of the City so long as they are licensed or approved by the state in which they are located. (D.C. Code § 3-217.2)

**Intake:** A 24-hour, 7-day-a-week system to receive and screen information from the public about suspected child abuse and neglect. The function, located in CFSA's Child protective Services Administration, is the agency's single point of entry to receive all inquiries and request for services from the public.

By calling 202-671-SAFE, anyone can reach trained social workers to report suspected child abuse or neglect.

**Intake Backlog:** An Agency term describing a group of cases in which an intake investigation has not been completed more than 30 days after the receipt of a report. Any case that has not been investigated within the 30-day timeframe is described as "backlogged" or "in the backlog". This backlog is to be eliminated under the LaShawn Implementation Plan. (LaShawn Revised Implementation Plan, Section A., August 1, 1994) .The 30 day timeframe begins at the time the report is received and ends when the supervisor of the worker conducting the investigation signs off on the completed investigative report and any accompanying casework materials.

**Intensive Family Services:** also known as Families Together, provides intensive counseling, education, and supportive services to families (including extended, foster, and adoptive families) in serious crisis, with the goal of protecting the child, strengthening and preserving the family, and preventing what would be an unnecessary out-of-home placement of children; or promoting the return home of children.

**Intensive Services:** is the level of out-of-home care provided to children who have mental health/emotional problems or medical conditions. This level of care requires professional intervention, behavior management skills, and close supervision from the caregiver.

**Interlocutory Decree:** an interim decree of adoption. It has the same legal effect as a final decree while it is in effect. An interlocutory decree is generally entered when the Court or a party has some reservations about the adoption and wishes to give the pre-adoptive placement more time before a final decree is entered. An interlocutory decree will state that the adoption is to become a final decree on a specific date, usually between six months and one year from that date unless the decree is set aside for cause in the interim.

Interstate Compact on the Placement of Children (ICPC): A uniform law, which permits states to cooperate in the placement of children across jurisdictional lines. D.C. is a party to the Interstate Compact and all children placed in foster care and/or for adoption in another jurisdiction must be processed through the Agency Office of the Compact Administrator. (D.C. Code, Chapter 10A. ) . As a party to the ICPC, the District and its employees are responsible for full compliance with its terms. The purpose of the ICPC is to ensure that:

1. each child who requires placement will receive the maximum opportunity to be placed in a suitable environment with qualified individual or institutional caregiver;
2. the appropriate authority, in a state where a child is to be placed, will have full opportunity to ascertain the circumstances of the proposed placement in order to promote full compliance with applicable child protection requirements;
3. the appropriate authority in the original state has access to the most complete information to evaluate a projected placement before it is made; and
4. appropriate jurisdictional arrangements for the care of the child are promoted.

Investigation: A mandated process in which CFSA and/or the police gather, evaluate and act upon information received in a report of alleged' child abuse or neglect. The purpose of an investigation is to determine, to the extent possible:

1. the nature, extent and cause of any reported abuse or neglect;
2. the identity of the person responsible for the abuse or neglect;
3. the name, age, sex and condition of the abused or neglected child and of all other children in the home;
4. the conditions in the home at the time of the investigation;
5. whether there is any child in the home whose health, safety or welfare is in jeopardy because of his or her treatment in the home or his or her home environment; and
6. whether any child-who is in jeopardy because of treatment in the home or his or her home environment should be removed from the home or can be protected by the provision of resources or services available in the community (D.C. Code § 6-2104 (b) (1)-(6)) .Such services include, but are not limited to:
  - a. emergency financial aid;
  - b. temporary third-party placement with responsible neighbors or relatives;
  - c. emergency in-home caretaker(s); .homemaker services;
  - d. daycare for any abused or neglected child and his or her siblings;
  - e. counseling services, and

- f. medical evaluation and or treatment of any abused or neglected child by a physician.

( D.C .Code § 6 -2124 ( a ) ( 1 ) -( 8 ) ) .

Investigation Date: See Investigation Start Date.

Investigation Disposition: See Maltreatment Disposition Level

Investigation Disposition Date: See Maltreatment Disposition Date

Investigation Start Date: The date when CPS first had face-to-face contact with the alleged victim of child maltreatment or attempted to have face-to-face contact.

Juvenile Court Petition: A legal document requesting that the court take action regarding the child's status as a result of the CPS response; usually a petition requesting the child be declared a dependent and placed in an out-of-home setting.

Kin: Means an individual who is related by blood, marriage or adoption.

Kinship Adoption: an adoption where the petitioner is a relative and /or long-time family friend of a child.

Kinship Care: is full time parenting and protection by a person related by blood, marriage or adoption. For a person to be considered a kinship caregiver, he/she must be related within the 5th degree to the dependent child (i.e. the equivalent of a great-great-great grandmother or a first cousin once removed). Kinship is to be the first placement option considered when a child must be separated from his/her parents due to abuse, neglect, or special needs. Kinship care may be an option when the child's legal custody remains with the family or when it has been transferred to CFSA. See also, Third Party Placement and Relative Foster Care.

Kinship Caregiver: is an individual who meets the following criteria:

1. is approved by CFSA to provide kinship care services;
2. is at least 21 years of age;
3. is providing or willing to provide for the day-to-day care of a child; and
4. is a relative of the child by blood, marriage, or adoption.

Kinship Care Foster Home: is a relative family home licensed by the District of Columbia or a state to provide 24 hour substitute care for a child in foster care status. Relative foster care setting includes:

1. Licensed Relative Foster Family Home
2. Emergency Care Foster Homes

**Kinship Foster Care:** Means a situation in which a kin provides full time care to any child(ren) who is committed to CFSA custody as a result of an abuse or neglect procedure, voluntary placement, police hold, or the relinquishment of parental rights. Kinship foster homes shall be licensed in accordance with the requirements outlined in the Section of the Policy entitled Assessment Process of Kinship Foster Homes.

**Kinship Foster Home Study:** A kinship foster home study is a process that takes place following the placement of the child (ren) in the care of a potential kinship caregiver who has elected to become a kinship foster care provider for their kin and agrees to undergo the licensing requirements of a non-relative foster care provider.

**Kinship Home Approval Process:** The assessment process which takes place once a child(ren) has been placed with the kinship caregiver in order to determine the potential caregiver's ongoing appropriateness to care for their kin placed in their home by CFSA. This approval process applies to all kinship caregivers regardless of the source of financial support received for the child (ren) placed with the caregiver.

**Kinship Triad:** The kinship triad refers to those parties involved in the kinship care process/planning including the child, the child's birth parent, and the kinship caregiver(s).

**Learning Disability:** A disorder in one or more of the individual's basic psychological processes involved in understanding or using language, spoken or written, that may manifest itself in an imperfect ability to listen, think, speak, read, write, spell or use mathematical calculations. The term includes conditions such as perceptual disability, brain injury, minimal brain dysfunction, dyslexia and developmental aphasia. (NCANDS).

**Least Restrictive Environment (LRE):** Placement of a student with disabilities in a setting that allows maximum contact with students who do not have disabilities, while appropriately meeting the student's special education needs.

**Left-Alone:** A colloquial Agency term describing a child found unaccompanied or in the care of someone unable or unwilling to supervise- the child properly. An Agency social worker encountering a left alone child is authorized to make a third- party placement. If a third-party placement cannot be made, the worker may temporarily take the child into custody and place the child. (D.C. code § 6-2124(b)). See also, temporary custodial placement.

**Legal Custody:** A court-ordered legal status pertaining to the day-to-day, ordinary care, discipline and protection of a child. An order of legal custody entitles the custodian to determine: " where and with whom the child lives .The legal custodian is responsible for providing the child with food, clothing, shelter, education and routine medical care. When legal custody has been granted to the Agency or to an individual who is not the child's parent, the child's parents retain guardianship rights and the right to make major decisions affecting their child. Such rights include determination of the child's religious affiliation, the right to consent to adoption and the right to visit the child. The parents remain obligated to provide financial support for the child even when the child is in the legal custody of another person or institution. (D.C. Code § 16-2301 (21) and (22)).

**Legal Father:** a man who is married to the birth mother at the time of conception, regardless of whether he actually fathered the child.

**Legal Guardianship:** A court-ordered legal status in which a relative or relative custodian is responsible for the general welfare a minor child placed in his/her care. The Guardian has the right to make important decisions in matters having a permanent effect on the minor's life and development. It includes, but is not limited to:

1. The authority to consent to marriage, enlistment in the armed forces and major medical, surgical or psychiatric treatment;
2. The authority to represent the minor in legal actions and to make decisions of substantive legal significance concerning the minor;
3. The authority and duty of reasonable visitation (except as limited by court order);
4. The rights and responsibilities of legal custody when Guardianship of the person is exercised by the child's birth or adoptive parent (except when legal custody has been vested in another person, agency or institution); and
5. The authority to exercise residual parental rights and responsibilities when the rights of the child's parents or only living parent have been judicially terminated or when both parents are dead.

**Legal, Law Enforcement, Or Criminal Justice Personnel:** People employed by a local, State, tribal, or Federal justice agency including law enforcement, courts, district attorney's office, probation or other community corrections agency, and correctional facilities.

**Legal Services:** Activities provided by a lawyer, or other person(s) under the supervision of a lawyer, to assist individuals in seeking or obtaining legal help in civil matters such as housing, divorce, child support, guardianship, paternity and legal separation.

**License:** Issued by the Department of Health to foster home located in the District of Columbia who have met the licensing standards for foster homes.

**License Approval:** Issued by CFSA to foster homes in Maryland who have met the licensing requirements governing the District of Columbia and the residing jurisdiction to operate foster homes.

**Licensed Relative Foster Family Home:** A home licensed or approved by D.C. or a state in which a relative of a child in foster care status is authorized to provide 24 hour substitute care for the child. In general, foster care maintenance payments are available for the support of foster children residing in currently licensed or approved relative foster family homes.

**Living Arrangement:** The type of home or placement situation in which a child resides.

**LSD:** LSD also called acid. It is a hallucinogen-a potent mood-changing drug, which is found in tablets, capsules or liquid form.

**Mainstreaming:** The concept that students with disabilities should be educated with nondisabled students to the maximum extent possible.

**Maintenance:** is a per diem payment that is what the child would have received but not greater than CFSA board and care payments.

**Maltreatment:** In general usage, this term often refers to any type of child abuse or neglect. Under District of Columbia law, the word "maltreatment" is specifically defined as "failure to provide adequate food, clothing, shelter, or medical care, which includes medical neglect, and the deprivation is not due to the lack of financial means of the child's parent, guardian or other custodian". (D.C. Code § 16-2301) (24) .See also, negligent treatment.

**Maltreatment Death:** The child died as a result of abuse or neglect. The conclusion may be that the abuse or neglect was the cause of the death or that abuse or neglect was a contributing factor to the death.

**Maltreatment Disposition Date:** The point in time at the end of the CPS response when a worker determines a disposition to a report of child maltreatment.

**Maltreatment Disposition Level:** The determination resulting from the CPS response to a report of alleged child maltreatment.

**Mandated Reporter:** A person working in certain occupational categories who learns or suspects that a child known to him or her in his or her professional or official capacity has been, or is in danger of being, abused or neglected must report to CFSA or the police. Those who must report are:

1. physicians
2. psychologists
3. medical examiners
4. dentists
5. chiropractors
6. registered and licensed practical nurses
7. healthcare workers
8. law-enforcement officers
9. teachers and school officials
10. social service workers
11. day care workers
12. mental health professionals

When an individual is required as a employee of an agency or institution to make a report, he or she must immediately notify the person in charge of the agency or institution (or his or her designee) .The person in charge is then required to make the report; however, the fact that the mandated reporter has notified the person in charge of the agency or institution does not relieve the mandated reporter of his or her responsibility to report. (D.C. Code §§ 2-1352, 2-1353) .

**Mandated Reports:** In the District of Columbia, mandated reporters of suspected child abuse and neglect include any person who knows or has reasonable cause to suspect that a child known to them in their professional or official capacity has been or is in immediate danger of being a physically or mentally abused or neglected child. According to the law, they must immediately report or have a report made of their knowledge or suspicions either to the Metropolitan Police Department (MPD) for abuse reports or the Child and Family Services Agency of the District of Columbia for neglect reports.

**Marijuana:** Marijuana is the most frequently used illegal drug in the United States. Marijuana is a green, brown or grayish mixture of dried, shredded leaves, stems, seeds and flowers of the hemp plant.

**Mediation:** A formal intervention between parents and personnel of early intervention or school systems to achieve reconciliation, settlement, or compromise.

**Medicaid:** a program established by Title XIX of the Social Security Act ("Title XIX") and which provides medical services to needy persons, including families with children, the elderly, or the disabled; applicants must met certain eligibility requirements.

**Medical:** is a continuation of Medicaid eligibility

**Medical Neglect:** A type of maltreatment caused by failure by the caregiver to provide for the appropriate health care of the child although financially able to do so, or offered financial or other means to do so.

**Medical Personnel:** People employed by a medical facility or practice, including physicians, physician assistants, nurses, emergency medical technicians, dentists, dental assistants and technicians, chiropractors and coroners.

**Mental Health Personnel:** People employed by a mental health facility or practice, including psychologists, psychiatrists, therapists, etc.

**Mental Health Services:** Activities which aim to overcome issues involving emotional disturbance or maladaptive behavior adversely affecting socialization, learning, or development. Usually provided by public or private mental health agencies and includes both residential and non-residential activities.

**Mental Injury:** A conduct, cognitive, affective or other mental disorder caused by the acts or omissions of a parent, guardian or custodian. (NCANDS)

**Mental Retardation:** As clinically diagnosed, significantly sub-average general cognitive and motor functioning existing concurrently with deficits in adaptive behavior manifested during the developmental period that adversely affect socialization and learning. (AFCARS, CFR 45 § 1355 Apps.)

**Methamphetamine:** Methamphetamine, also known as “meth,” “speed” or “crank” is a stimulant drug that affects the central nervous system.

**Military Family Member:** A legal dependent of a person on active duty in the Armed Services of the United States such as the Army, Navy, Air Force, Marine Corps, or Coast Guard.

**Military Member:** A person on active duty in the Armed Services of the United States such as the Army, Navy, Air Force, Marine Corps, or Coast Guard.

**Minor:** An individual under the age of 21 (D.C. Code § 16- 2301(4)).

**Multidisciplinary Evaluation:** The testing of a child by a group of professionals, including psychologists, teachers, social workers, speech therapists, nurses, etc.

**Multiple-Handicapped Rate:** is the rate paid for children who require adult intervention in more than one age appropriate daily living process i.e. Eating, bathing, toileting, dressing, ambulating, emotional and/or social control. The multiple-handicapped rate is reserved for the most severely handicapped children. Extensive training may be needed for a foster parent to provide an adequate level of care for the multiple-handicapped child.

A request for a multiple-handicapped rate must be accompanied by a professional diagnosis and treatment plan. There will be a complete discussion of the intervention to be provided by the foster parent.

**Native Hawaiian or Other Pacific Islander:** Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**NCANDS:** National Child Abuse and Neglect Data System. NCANDS is a national, voluntary system for collecting and analyzing data about child abuse and neglect established by the National Center for Child Abuse and Neglect (NCCAN) under the Child Abuse Prevention, Adoption and Family Services Act of 1988.

**NCANDS Mapping Forms:** The functional specification of transferring State data to NCANDS fields and values. This process is used for both Child and Agency data.

**Neglect:** Under D.C. law, a neglected child is one who:

1. has been abandoned or abused by his or her parent, guardian, or other custodian;

2. is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his or her physical, mental or emotional health, and the deprivation is not due to the lack of financial means of his or her parent, guardian or other custodian;
3. has a parent, guardian or other custodian who is unable to discharge his or her responsibilities to and for the child because of incarceration, hospitalization or other physical or mental incapacity;
4. has a parent, guardian or custodian who refuses or is unable to assume responsibility for the child's care, control or subsistence and the person or institution which is providing for the child states an intention to discontinue such care ;
5. is in imminent danger of being abused and whose sibling has been abused;
6. has received negligent treatment or maltreatment from his or her parent, guardian or other custodian; or
7. has resided in a hospital located in the District of Columbia for at least 10 calendar days following birth, despite a medical determination that he or she is ready for discharge, and the parent, guardian or custodian of the child has not taken any action or made any effort to maintain a relationship with the child or to contact him or her. (D. C. Code § 16-2301 (9) (A) -(G) .

In federal regulation, neglect is defined as "alleged or substantiated negligent treatment or maltreatment, including failure to provide adequate food, clothing, shelter or care". (AFCARS 45 CFR § 1355 App. A)

Neglect Petition: A legal document based upon a neglect complaint filed with the Superior Court of the District of Columbia Family Division by the Office of the Corporation Counsel (OCC) .The petition alleges that a child is an (abused or) neglected child. (D.C. Code § 16-2305).

Negligent Treatment: Failure to provide adequate food, clothing, shelter, or medical care, which includes medical neglect, and the deprivation, is not due to the lack of financial means of the child's parent, guardian or other custodian. (D.C. Code §16- 2301(24). See also, maltreatment and neglect.

Neighbor: A person living in close geographical proximity to the child or family.

Non-Caregiver: A person who is not responsible for the care and supervision of the child, including school personnel, friends, neighbors, etc.

**Non-Recurring Cost:** legal fees as dictated by policy and other one time costs related to a child's special need which is not funded by other eligibility programs, e.g. van conversion.

**Normal Rate:** is paid for the basic and routine care required by a child who comes from a neglecting or abusing family. It is expected that basic care will include bringing the child into the regular, daily life of the foster family, providing 24 hour/day adult supervision, and facilitating weekly visits with the natural parents by providing transportation to the agency or by permitting parental visitation in the foster parents are expected to participate in parent-teacher conferences and other school related activities; they are to provide routine recreational opportunities.

**Not Substantiated:** See Unsubstantiated.

**Notifications:** Mandated or courtesy contacting of other agencies with overlapping or potentially overlapping jurisdiction concerning a report of child maltreatment.

**Objective:** An objective is a short-term step taken to reach an annual goal. IEP objectives are the steps between a student's present level of performance and an annual goal.

**Office of the Corporation Counsel (OCC):** The Office which represents the interests of the City in legal matters pertaining to cases of abused and neglected children before the Superior Court of the District of Columbia. A staff attorney in the OCC is known as an Assistant Corporation Counsel (ACC).

**One-Time Rental Assistance:** financial assistance provided in order to assist families with payment of back rent due or current rent due but which families are not financially able to provide.

**Open:** Status of a case when an investigation is being conducted or services are being provided by CFSA and/or a contractual agency to a family or to any individual in a family. When an investigation or delivery of services has been concluded, a case remains in an open status) until appropriate closing paperwork has been prepared and processed.

**Order of Reference:** an order from the Court directing the Agency to make a report and recommendation regarding the petition to adopt a child.

**Other Medical Condition:** A medical condition other than mental retardation, visual or hearing impairment, physical disability, or being emotionally disturbed that significantly affects functioning or development or requires special medical care such as chronic illnesses. Included are children or caregivers diagnosed as HIV positive or with AIDS.

**Other Services:** Activities that have been provided to the child and/or family, but which are not included in the services listed in the Child File record layout.

**Out-Of-Court Contact:** Contact, which is not part of the actual judicial hearing, between the court-appointed representative and the child victim. Such contacts enable the court-appointed representative to obtain a first-hand understanding of the situation and needs of the child victim, and to make recommendations to the court concerning the best interests of the child.

Papering a Case: a colloquial term denoting the collaborative process which occurs between CFSA staff and staff of the Office of the Corporation Council (OCC) and between Metropolitan Police Department Staff and The OCC in determining whether to file a neglect petition in a case and drafting the petition.

Parent: The birth mother/father, adoptive mother/father or step mother/father of a child. (NCANDS).

Periodic Review: The administrative or court review of a foster care case required by P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980". P.L. 96-272 set up a case review system for assuring that the status of each child is reviewed periodically but no less frequently than once every six months by either a court or by administrative review in order to:

1. determine the continuing necessity for and appropriateness of the placement;
2. determine the extent of compliance with the case-plan;
3. determine the extent of progress made toward alleviating or mitigating the causes necessitating placement in foster care; and
4. project a likely date by which the child may be returned home or placed for adoption or legal guardianship.

(P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" Section 475(5)(B)) .

Permanent Freeze: A foster home where a determination has been made not to place additional children in the home. The foster children currently residing in the home are not in any kind of danger and it would be in their best interest to remain in the home, once the last child is removed the foster home is officially closed.

Permanency Goals: Permanency goals for children in foster care in D.C. are based upon federal requirements found in P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980". They are:

1. Reunification with a parent (or legal guardian) ;
2. Reunification with a relative;
3. Adoption;
4. Long-Term Foster Care; and
5. Independent Living.

(P.L. 96-272 the "Adoption Assistance and Child Welfare Act of 1980" § 475(5) (C). See also, permanency planning.

Permanency Planning: The process established under P..L. 96-272, the "Child Welfare and Adoption Assistance Act of 1980", through which a child in foster care benefits from case

planning, periodic reviews and other procedural safeguards to ensure that the child enters care only when necessary and is appropriately placed and is returned home or to a permanent living situation in a timely fashion.

**Perpetrator:** An individual who is determined to have abused or neglected a child. Under the child abuse and neglect definitions in D.C. law, a parent, guardian or custodian are those who may be found to have abused or neglected a child. (D.C. Code § 2301 (9) and ( 23 ) ) .

**Petition/Petitioner:** a petitioner is one who had decided to request through the legal system permanent care of a child(ren) through adoption. This request is known as the petition.

**Petition Date:** The month, day, and year that a juvenile court petition was filed.

**Physical Abuse:** Type of maltreatment that refers to physical acts that caused or could have caused physical injury to the child.

**Physically Disabled:** A clinically diagnosed physical condition that adversely affects day-to-day motor functioning, such as cerebral palsy, spina bifida, multiple sclerosis, orthopedic impairments, and other physical disabilities.

**P.L. 96-272:** The "Adoption Assistance and Child Welfare Act of 1980" which established current standards for federal financial participation in the maintenance of children in foster care and adoptive placements in the United States.

**Placement Conference:** a meeting to discuss the transition plan of a child(ren) into a home of a foster/adoptive parent.

**Police or Prosecutor:** Police refers to the department of government charged with prevention, detection, and prosecution of public nuisances and crimes such as child maltreatment. Prosecutor refers to a legally trained person with responsibility to represent the State in court proceedings.

**Post-Adoptive Services:** Services provided to meet the ongoing needs of the family once an adoption has been finalized. (29 DCMR 1645.1) .

**Pre-Adoptive Home:** A home in which the family intends to adopt a child residing in the household. The family may or may not be receiving a foster care payment or an adoption subsidy on behalf of the child. (AFCARS, 45 CFR § 1355 App. A).

**Pregnancy and Parenting Services for Young Parents:** Activities for married or unmarried adolescent parents and their families to assist them in coping with social, emotional, and economic problems related to pregnancy and to plan for the future.

**Prevention Services/Services to Families with Children:** are services designed to support and improve the functioning of the family. Such services can include mentoring, tutoring, educational/job training, housing assistance, advocacy and legal assistance. The law requires the agency to either provide for, or contract for, any of several child abuse and

neglect prevention services. Prevention services shall be provided and funded through the use of local and federal funds. Preventive services are provided directly to children and their families through a network of public and private partnerships including community-based services.

Primary Prevention: Provision of information and/or services designed to reduce the likelihood that abuse or neglect of children will occur.

Prior Abuser: A person with a previous determination of substantiated, indicated, or alternative response – victim in the State information system.

Prior Victim: A child with a previous determination of substantiated, indicated, or alternative response – victim in the State information system.

Promoting Safe And Stable Families Program: Program that provides grants to the States under Section 430, Title IV-B, subpart 2 of the Social Security Act, as amended, to develop and expand four types of services: 1) community-based family support services; 2) Innovative child welfare services, including family preservation services; 3) time-limited reunification services; and 4) adoption promotion and support services.

Private Kinship Care Provider: A relative providing full time care for a child (ren) when custody remains within the family. For purposes of this policy, this includes only those formal kinship care arrangements that require protective services involvement.

Private Placement: See Third-Party Placement and Private Kinship Care Provider.

Protective Supervision: A legal status in which a judge orders that a child who has been adjudicated neglected by the Superior Court of the District of Columbia Family Division remain in his or her home. (D.C. Code § 16-2320) .Such an order may remain in effect for up to one year; however, the Agency may terminate supervision earlier if it appears that the purpose of the order has been achieved. An order of protective supervision can be extended by the court for additional periods of one year. (D.C. Code §§ 16-2301(19) and 16-2322) .

During a period of protective supervision, parents retain all legal rights and responsibilities including guardianship, legal-custody and physical custody. When protective supervision is ordered, the Agency must continue to assess the safety of the child and provide services as appropriate to reduce or eliminate risk of future harm. A judge may require that the child return to court at any time during the period of protective supervision, which may only be terminated by a rescindment order.

Public Assistance: Participation in any of the following social service programs such as TANF, General Assistance, Medicaid, SSI, Food Stamps, etc.

Public Law: Public Law 96-272 (The Adoption Assistance and Child Welfare Act of 1980) which established current standards for federal financial participation in the maintenance of children in foster care and adoptive placements in the United States.

Putative Father: a man who is assumed to be a child's biological father. A man that was not married to the birth mother at the time of conception is considered to be the putative father until a

paternity test confirms or disputes his paternity or until he signs an affidavit of paternity or a denial of paternity.

**Quality Assurance:** The process for identifying gaps in services, evaluating and tracking the completeness and accuracy of service delivery based on compliance with statutory and regulatory requirements, and examining and monitoring the performance of staff.

**Race:** The primary racial group with which an individual identifies or is identified by others. In the case of a young child, parents determine the child's race. (AFCARS 45 CF'R § 1355 Apps.

**RACE - Unable To Determine:** See Unable To Determine (Race).

**Reasonable Accommodation:** The modification of programs in ways that permit students with disabilities to participate in educational programs that receive federal funding. The concept also applies to the modification of job requirements and equipment for workers with disabilities.

**Reasonable Efforts:** P.L. 96-272 "The Adoption Assistance and Child Welfare Act of 1980" requires that "reasonable efforts" be made to prevent the placement of children in foster care and/or to reunify them with their families. To meet this requirement, services must be available to children and families, which may include:

1. 24-hour emergency caretaker;
2. homemaker services;
3. day care;
4. crisis counseling;
5. counseling, including mental health and substance abuse counseling, vocational counseling or vocational rehabilitation;
6. emergency shelters;
7. emergency financial assistance;
8. respite care;
9. home-based family services;
10. self-help groups;
11. services to unmarried parents; and
12. post-adoption services.

When a child is in foster care, the child's case plan must describe reasonable efforts made to prevent placement and/or to reunify the child with his or her family. (45 CFR §§ 1356 .21 ( d ) ( 4 ) and 1357 .15 ( e ) ( 2 ) ) .

**Receipt Of Report:** The log-in of a call to the agency from a reporter alleging child maltreatment.

Referral: The direction of a person by a CFSA staff member or other professional to aid, information or services.

Related Services: Those services a student must receive to benefit from special education; for example, transportation, counseling, speech therapy, crisis intervention, etc.

Relative: A person connected to the child by blood, such as parents, siblings, grandparents, etc.

Relative Foster Care: 24 hour substitute care by a relative for a child in foster care status. Third-party placement of a child with a relative does not constitute relative foster care. Relative shelter care settings includes:

1. Licensed or Approved Relative Foster Family Home: A home licensed or approved by D.C. or a state in which a relative of a child in foster care status is authorized to provide 24 hour substitute care for the child. (AFCARS, 45 CFR § 1355 App. A) .In general, foster care maintenance payments are available for the support of foster children residing in currently licensed or approved relative foster family homes. See also, Foster Care.
2. Unlicensed Relative Foster Family Home: A home in which a closely related caregiver not licensed or approved as a foster parent by D.C. or a state is providing 24 hour substitute care for a child in foster care status. See also, foster care. (AFCARS, 45 CFR § 1355 App. A) .In general, AFDC payments are available for the support of foster children residing in unlicensed relative foster family homes.

Relative Placement: Any placement of a child within the child's extended; family system rather than with a parent. See also, Third-Party Placement and Relative Foster Care.

Religious Exemption: According to current D.C. law, "no child who in good faith is under treatment solely by spiritual means through prayer in accordance with the tenets and practices of a recognized church or religious denomination by a duly accredited practitioner thereof shall for that reason alone be considered a neglected child". (D.C. Code § 16-2301) .

Relinquishment: When a child's parent, executes a written document assigning physical and legal custody of the child to the Agency for the purpose of having the child adopted. (AFCARS, 45 CFR § 1355 App. A).

Under D.C. law, parental rights may not be relinquished for 72 hours following the birth of a child. Prior to accepting a relinquishment, the Agency must provide counseling by a professional social worker to the parent regarding alternative services available and, to both the parent and, if appropriate, the child, regarding psychological and emotional issues. A relinquishment is executed voluntarily in writing by the parent in the presence of an Agency representative and a witness. A parent may automatically revoke a relinquishment in writing within 10 days of executing it. If the 10<sup>th</sup> day falls on a week- end or holiday, the time allowed for revocation is extended to the next working day. After exercising an automatic

revocation, a parent may not execute a second relinquishment until 30 days have elapsed. A second relinquishment is irrevocable unless a court finds that it was not voluntary. (D.C. Code § 32-1007).

**Removal Date:** The month, day, and year that the child was removed from the care and supervision of his or her parents or parental substitutes, during or as a result of the CPS response. If a child has been removed more than once, the removal date is the first removal resulting from the CPS response.

**Removal from the Home:** An action taken when an investigation indicates that a child is abused or neglected and cannot be adequately protected by services offered in the home, or pursuant to a voluntary placement agreement, or when a child is relinquished. CFSA may remove a child only in the case of a boarder baby or with consent of the child's parent, guardian or custodian. Under D.C. law, in all other situations, a court order must be obtained or the removal must be effected by a law enforcement officer when the officer believes that removal is necessary because:

1. the officer has reasonable grounds to believe that the child is in immediate danger from his or her surroundings; or
2. after consultation with an authorized individual at CFSA, he or she has reasonable grounds to believe that the child is suffering from illness or injury; or
3. is otherwise endangered and cannot be protected by the provision of services or resources.

When a child removed from the home is placed in shelter care, a shelter care hearing must be held in the Superior Court of the District of Columbia no later than the next day, excluding Sundays, after the child has been taken into custody. (D.C. Code §§ 6-2105, 6-2124, 16-2310 and 16-2312).

**Report:** An allegation that a child is known or suspected to have been abused or neglected and/or is in immediate danger of abuse or neglect. A report is investigated in order to determine whether it is supported or unsupported by credible evidence. Any individual may report child abuse or neglect to the police or to CFSA (generally via the Intake Hotline at (202) 223-2255). Those employed in certain occupations are mandated to make an immediate report, which should include the following information:

1. the name, age, sex and address of the child who is the subject of the report and each of the child's siblings, parents or other persons responsible for the care of the child;
2. the nature and extent of any current and/or, if known, past abuse or neglect;
3. all other information, which the reporter believes, may be helpful in establishing the cause of any abuse or neglect and the identity of the perpetrator(s) .
4. name, occupation and means of contacting the report as well as information regarding any actions the reporter has taken with respect to the child.

Anyone making a report in good faith is immune from civil or criminal liability pertaining to the report (D.C. Code §§ 2-1352,2-1353,2-1354,6-2101(6)-(9)). See also, mandated reporter.

Report Date: The month, day, and year that the responsible agency was notified of the suspected child maltreatment.

Report Disposition: The determination that results from the CPS response pertaining to a report of child maltreatment.

Report Disposition Date: The month, day, and year that a decision was made by CPS or by a court regarding the disposition of a CPS response.

Report ID: See Report Identifier.

Report Identifier: A unique identification assigned to each report of child maltreatment.

Report Source: The category or role of the person who makes a report of alleged maltreatment.

Residential Facility Staff: Employees of a public or private group residential facility, including emergency shelters, group homes, and institutions.

Respite Care: Temporary care of a child to provide relief to the caretaker. May involve care of the child outside of his or her own home for a brief period of time, such as overnight or for a weekend. Respite care is not considered to be foster care or other type of placement. (AFCARS, 45 CFR § 1355 App. A).

Response Time With Respect To The Initial CPS Response: The time between the log-in of a call to the State Agency from a reporter alleging child maltreatment and the face-to-face contact with the alleged victim, where this is appropriate, or to contact with another person who can provide information.

Response Time With Respect To The Provision Of Services: The time from the log-in of a call to the agency from a reporter alleging child maltreatment to the provision of post-investigative services, often requiring the opening of a case for ongoing services.

RFP: Request for Proposal

SACWIS: See Statewide Automated Child Welfare Information Systems.

Scope of Services: This policy is intended for all CFSA and contract agency staff with responsibility for children who have been removed from their home due to abuse or neglect.

Screened-In Referrals: Reports of child maltreatment that met the State's standards for acceptance and were referred for CPS investigation or assessment.

Screened-Out Referrals: Reports of child maltreatment that did not meet the State's standards for acceptance and were screened out prior to CPS investigation or assessment.

Screening: is the preliminary evaluation process for prospective caregivers.

Self-Sufficiency: the family is no longer in need of financial assistance from CFSA.

Service Date: The date activities began as a result of needs discovered during the CPS response.

Services: Non-investigative public or private non-profit activities provided or continued as a result of a CPS response. In general, only activities that occur within 90 days of the report are included in NCANDS.

Services, Opened: Services for which an individual or family has been formally enrolled.

Services, Planned: Services for which an individual or family is intended to be enrolled.

Sexual Abuse: A type of maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities.

Sexual Exploitation: When a parent, guardian or other custodian allows a child to engage in prostitution as defined by law, or allows a child to engage in obscene or pornographic photography, filming or other forms of illustrating or promoting sexual conduct as defined by law. (D.C. Code § 16-2301 (25)) .

Shelter Care: Temporary care of a child in physically unrestricting facilities, designated by the Court, pending a final disposition of a neglect petition. (D.C. Code § 16- 2301(14)).

Short-Term Rental Subsidy: short-term, up to one year, financial assistance from CFSA.

Social Services Block Grant: Funds provided by title XX of the Social Security Act that are used for services to the States that may include child care, child protection, child and foster care services, and daycare.

Social Services Personnel: Employees of a public or private social service or social welfare agency, or other social worker or counselor who provides similar services.

Social Worker: Worker assigned to the child(ren) and who has responsibility for the safety and well being of a child.

Special Board Rate: is paid for a child who has a regularly reoccurring special need that requires extra ordinary time or expense on the part of a foster parent. A special need would be a reoccurring or ongoing professionally diagnosed medical, psychiatric, educational or social need, which can not be met by normal levels of parent involvement.

A request for a special board rate must be accompanied by a diagnosis and treatment plan. The foster parent must be able to provide a verifiable account of that need for expenditure of time and money.

**Special Needs:** A categorization which pertains to the eligibility of a child for an adoption subsidy under Title IV-E of the Social Security Act as specifically defined under State law. D.C. law defines a child with special needs as "any child who is difficult to place in adoption because of age, race, or ethnic background, physical or mental condition, or membership in a sibling group which should be placed together. A child for whom an adoptive placement has not been made within 6 months after he [or she] is legally available for adoptive placement shall be considered a child with special needs within the meaning of [the statute] ". (AFCARS, 45 CFR § 1355 App. A and D.C. Code § 3-115 (2) (A)).

**Special services:** are specific, time-limited services based on a child's specific special needs.

**Special Services-Disabled:** Activities for persons with developmental, physical, emotional, visual or auditory impairments that are intended to help maximize their potential, alleviate the effects of their disabilities, and to enable these persons to live in the least restrictive environment possible.

**Special Services-Juvenile Delinquent:** Activities for youth (and their families) who are, or who may become, involved with the juvenile justice system.

**Standardized Tests:** In a vocational assessment, standardized tests are used to predict how a student is likely to perform in jobs calling for certain interests and skills.

**State Agency:** The agency in a State that is responsible for child protection and child welfare.

**State Child Welfare Programmatic Staff:** Personnel whose focus is the definition and operation of the State's child welfare program.

**State Data System:** Any number of State computer systems which are focused on supporting the child welfare efforts of the State.

**State/Territory:** The primary geopolitical unit from which child maltreatment data are collected. Washington, DC and U.S. territories have the same status as States.

**Statewide Automated Child Welfare Information Systems (SACWIS):** Any of a variety of automated systems designed to process child welfare information on a state-wide basis.

**Stepparent:** The husband or wife, by a subsequent marriage, of the child's mother or father.

**Steroids:** Steroids are synthetic compounds related to the male sex hormone testosterone. They come in tablets or liquid forms.

**Subsidy:** See Adoption Subsidy.

**Substance Abuse Services:** Activities designed to deter, reduce, or eliminate substance abuse or chemical dependency.

**Substantiated:** Disposition of reported child abuse or neglect which concludes by a preponderance of credible evidence gathered that the report is supported, founded or validated according to the law of the District of Columbia. See also, Supported Report.

**Supervisor:** Staff person assigned to supervise a social worker at the time of the report disposition.

**Supervisor ID:** See Supervisor Identifier.

**Supervisor Identifier:** A unique identification of a supervisor who is assigned to the child at the time of the report disposition.

**Supplemental Security Income (SSI):** A program established by Title XVI of the Social Security Act (Title XVI) that provides federal assistance to the elderly, the disabled, children, and the poor who meet certain eligibility requirements; these payments are supplemental to any funding received from the District and are calculated on that basis.

**Supported:** Defined in statute as a report made by a mandated reporter which is supported by credible evidence (D. C. Code § 6-2101(8)) .See substantiated.

**Temporary Assistance to Needy Families (TANF):** The Block Grant program that replaced Aid to Families with Dependent Children (AFDC) in providing financial assistance to families to meet the needs of the child, living with a parent or relative, and meeting certain eligibility standards.

**Temporary Custodial Placement:** Under D.C. law, placement by CFSA in an Agency facility for a period up to 5 days when a child has been left alone or with inadequate supervision and a third-party placement cannot be made, provided that :

1. notice is left for the child's parent or custodian explaining the procedure for reclaiming the child;
2. efforts continue to locate the child's parent;
3. the child is returned forthwith upon the request of the parent or custodian, unless there is additional evidence of immediate danger to the child.

If CFSA finds that a child would be in immediate danger if returned to the home, the Agency contacts the police who may legally "remove" the child. A complaint is filed with the Superior Court of the District of Columbia if the police remove the child or if, at the end of 5 days, the parent or custodian fails to claim the child. (D.C. Code § 6-2124).

**Termination of Parental Rights (TPR):** Under D.C. law, a judicial proceeding in which a motion is filed by the Office of the Corporation Counsel (OCC) or by the guardian ad litem (GAL) for the child. This motion seeks to have the parent's parental rights terminated, so that the child is free for adoption. If the child has been adjudicated neglected due to abandonment (D.C. Code 16-2301(9) (A)) or as a boarder baby (16-2301(9) (G)), the TPR motion may be filed immediately after the adjudication. If the child was adjudicated

neglected under any of the other provisions of 16-2301(9), such as abuse, lack of care, etc., the TPR may not be filed until 6 months after the adjudication of neglect. A TPR motion must contain at least the following information, if it is known, or a statement declaring that it is not known, if that is the case:

1. identifying information about the child and his or her current placement;
2. name and title of the petitioner;
3. name and address of the child's parent;
4. a plain and concise statement of the facts and opinions on which the termination is sought;
5. a specification as to the health of the child;
6. a statement as to the general prospects for, or barriers, if any, to the adoption of the child; and
7. a statement pertaining to efforts to locate any absent parent of the child.

An order terminating parental rights divests the parent and the child of all legal rights, powers, privileges, immunities, duties and obligations with respect to each other, except the right of the child to inherit from his or her parent. The child's right of inheritance is only terminated by a final order of adoption. (D.C. Code §§ 16-2354 and 16-2361) .

Title IV-E: a reference to Title IV- E of the Social Security Act and the program established thereunder that provides a mechanism for the jurisdiction to receive federal funding for foster care maintenance costs, traditional independent living programs, and adoption assistance for children within the foster care system who meet certain eligibility requirements.

Tobacco: Tobacco can be found in cigarettes, cigars, pipes tobacco and smokeless tobacco.

Third-Party Placement: A term which describes temporary or long term placement of a child with responsible neighbors, relatives or another individual who is found to be qualified to receive and care for the child. This type of placement may occur with or without involvement of the Court. For example, CFSA may effect a third-party placement as a service when an investigation indicates that an abused or neglected child is in need of services, or the Court may place a child with a third-party when it finds that the child cannot be protected in his or her own home and the placement selected is likely to be less damaging to the child than the child's own home. (D.C. Code §§ 6-2124(a) (2) and 16-2320(a) (3) (c)). When in a third-party placement, a child is not in foster care.

Three-Seventy-Nine (379): The complaint form used by the Metropolitan Police Department to initiate court proceedings in cases of abused or neglected children.

Time-limited Family Reunification Services: Services and activities for a child and the child's parent(s), guardian or custodian in order to facilitate the safe, appropriate, reunification within 12 months of a child out-of-home placement.

Transition Plan: Plan of action detailing individualized procedures to facilitate and expedite placing a child in an adoptive home placement. Steps include pre-placement visits and consultation and incorporation of the foster family in the transitioning planning. The foster care and adoption social workers jointly develop this plan.

Transition Services: A coordinated set of activities for a student that promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment, continuing and adult education, adult services, independent living, or community participation.

Transportation Services: Activities that provide or arrange for travel, including travel costs of individuals, in order to access services, or obtain medical care or employment.

Three-Seventy-Nine (379): The complaint form used by the Metropolitan Police Department to initiate court proceedings in cases of abused or neglected children.

Title IV-A: The federal program under which Aid to Families with Dependent Children (AFDC), also known as welfare, is provided to certain needy families. AFDC is available for the support of children living with closely related family members as well as with parents.

Title IV-D: The federal program under which a parent receiving child support assigns those benefits to the Agency when a child is residing in foster care. Title IV-D also regulates the establishment and enforcement of child support orders in cases where the custodial parent is receiving AFDC and where there is no foster care involvement.

Title IV-E: The federal program under which maintenance payments may be made on behalf of low income, eligible and reimbursable children placed in foster care or with adoption subsidies.

Title XIX: The federal program under which medical assistance is provided for eligible low income children in foster care or adoptive placements.

Trial: see, fact-finding hearing.

Triennial Review: Every three years, a student in special education must be given a completely new evaluation/assessment to determine the student's progress and to make a new determination of eligibility for continued special education services.

Unable to Determine (Race): The inability to determine race because a child is very young or severely disabled and no one is available to identify the child's race.

Unborn: The child abuse victim was not yet born.

Under One Year: The child abuse victim was under one year old.

Uniform Crime Report: A descriptive summary of crimes committed in the United States compiled by the Federal Bureau of Investigation.

Unknown: The State collects data on this variable, but the data for this particular report or child were not captured or are missing.

Unknown Father: either the birth mother has indicated that she does not know the identity of the birth father or she refuses to name the father. The father is also unknown if the birth mother's whereabouts are unknown or if the birth mother is deceased and she never named a father.

Unsubstantiated: Disposition of reported child abuse or neglect which concludes by a preponderance of evidence gathered that the report is not supported, founded or validated according to the law of the District of Columbia. See also, unsupported report.

Unsupported Report: Defined in statute as a report made by a mandated reporter which is not supported by credible evidence. (D.C. Code § 6-2101). See unsubstantiated.

Unusual Incident Report: These reports refer to incidents that occur that require special attention, such as accidents or physical or mental health problems that result in the child needing medical attention, reports of abuse and/or neglect, abscondance, etc.

Victim: A child having a maltreatment disposition of "substantiated," "indicated," or "alternative response victim."

Visitation: In general, visits between a child in placement and a family member or other individual close to the child. Under D.C. law, when a child is in shelter care, weekly visitation with the child's parent, guardian or custodian occur unless a Judge prescribes a schedule of visitation or orders that visitation not be allowed. (D.C. Code § 16-2310(d)).

Visually Or Hearing Impaired: A clinically diagnosed condition related to a visual impairment or permanent or fluctuating hearing or speech impairment that may significantly affect functioning or development.

Voluntary Placement Agreement: A written agreement between a child's caretaker and the agency under which the child is removed from his or her home and placed in foster care for a limited time. Under LaShawn, a voluntary placement may not exceed 21 days unless it is extended to 42 days with appropriate, official permission. (LaShawn Revised Implementation Plan Section A. August 1, 1994) .

In order to receive federal funds for a voluntary placement, P.L. 96-272 protections must be provided to the child. If the placement lasts more than 180 days, a court must make a determination that continued voluntary placement is in the best interests of the child. The placement is still considered voluntary even if a subsequent court order is issued to keep the child in care. (AFCARS, 45 CFR § 1356.30) .

Ward: See committed child.

Waiver of Parental Rights: The power that the Court can exercise to waive the rights of the birth parents when all efforts to locate the birth parents have been exhausted.

White: Having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Worker: The worker assigned to the foster parent and has responsibility for assessing the on-going ability of the foster parent to provide a safe, loving and nurturing home environment for foster children.

Worker ID: See Worker Identifier.

Worker Identifier: A unique identification of the worker who is assigned to the child at the time of the report disposition.